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ABSTRACT

This document gives highlights of the family planning situation in many countries of the world. Its purpose is to provide a quick reference source for those who work in family planning. Population statistics are included for five continents and many countries. Data for the continents include population in 1976, projected population in 2000, population growth rate (1970-75), births per 1000 (1970-75), deaths per 1000 (1970-75), population under the age of 15 (1975), and life expectancy (1970-75). Data for each country include population (1976), growth rate, births per 1000, deaths per 1000, and family planning activity in the country. (RH)

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Introduction

FAMILY JLANNING IN FIVE CONTINENTS is an annual publication of the International Planned Parenthood Federation which aims to provide a quick reference source for those who work in family planning, population, and related fields. It gives highlights of the family planning situation all over the world, together with basic demographic statistics.

In order to help the busy reader, symbols have been used to mark the highlights of the family planning situation in each country. When you see Onext to the name of a country it means that the government is involved in family planning to a certain degree—it either provides limited services or supports the activities of other agencies, mostly in the private sector. Governments which have officially announced their intention to set up a comprehensive programme or have stated a policy to curb the growth of their population are also shown with this symbol. In denotes a higher degree of government involvement—an established family planning programme carried out either through the public health network or by a separate governmental agency. Two other symbols are used a indicates the existence of a private, voluntary family planning association and a denotes membership of the International Planned Parenthood Federation.

Organizations listed as providing assistance to one or more family planning projects in a country are those which give bilateral aid. An increasing number of countries also make contributions to multilateral programmes. By the end of September 1976, 26 governments had made contributions to IPPF programmes and 82 to the United Nations Fund for Population Activities.

To ensure a certain degree of comparability, demographic data for all countries have been taken from the UN sources. Wherever possible, results of latest population censuses have been used. For countries which have not taken a recent census or for which the results are not yet available, UN estimates made in 1973 have been quoted.

To save space, abbreviations have been used for the names of most organizations and for some of the more common terms. A key to these abbreviations is given on the next place.

For more information on family planning programmes throughout the world, please contact the information Departments of IPPF Central or Regional Offices.



EVIATIONS

Australian Development Assistance Agency Agnerican Public Health Association Association for Voluntary Sterilization Co-operative for American Relief Everywhere Inc ommunity-based Distribution Centro Latinoamericano de Demoirafía Caribbean Family Planning Affiliation Canadian International Development Agency hurch World Service Danish International Development Agency Food and Agriculture Organization amily planning Family Planning Association (or equivalent body) Family Planning International Assistance (USA) Department of Health, Education & Welfare (USA) nternational Association for Schools of Social Work nternational Bank for Reconstruction and Development (Yorld Bank) nternational Development Association nternational Development Research Centre (Canada) nformation and Education nter-Governmental Co-ordinating Committee for Population and Family

JOICEP Japanese Organization for International Co-operation in Family Planning Ŕap Knowledge, Attitude and Practice MCH Maternal and Child Health MOA Ministry of Agriculture MOE & Ministry of Education МОН Ministry of Health NORAD Norwegian Agency for International Development Pan American Health Organisation (WHO) PAHO **PPFC** Planned Parenthood Federation of Canada PSI Population Services International PRB Population Reference Bureau RC Roman Catholic SIDA Swedish International De elopment Authority SIECUS Sex Information and Education Council of the USA **UKODM** United Kingdom Overseas Development Ministry UNFPA United Nations Fund for Population Activities UNICEF United Nations International Children's Emergency Fund **UNESCO** United Nations Education, Scientific and Cultural Organisation UNRWA United Nations Relief Works Agency USAID United States Agency for International Development ŲŲSC Unitarian Universalist Service Committee WAY World Assembly of Youth WFP . World Food Programme WHO World Health Organisation

8



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ntra-Uterine Device

nternational Labour Organisation'

apanese International Co-operation Agency

Family Planning in Five Continents

Region	Population in 1976	Population in 2000	Population Growth Rate (1970-75)	Births per 1000 (1970-75)	Deaths per 1000 (1970-75)	Population Under 15	Life Expectancy (1970.75)
WORLD Africa Latin America North America East Asia South Asia Europe USSR Oceania	4,044,433,000 412,183,000 333,068,000 , 239,071,000 1,021,974,000 1,282,955,000 475,863,000 257,591,000 21,729,000	6,253,135,000 813,119,000 619,929,000 296,199,000 1,369,069,000 2,267,266,000 539,812,000 315,027,000 32,715,000	1.9% 2.6% 2.7% 0.9% 1.7% 2.5% 0.6% 1.0% 2.0%	31.5 46.3 36.9 16.5 26.2 41.9 16.1 17.8	12.8 19.8 -9.2 9.3 9.8 16.7 10.4 7.9 9.3	36.0% 44.2% 42.0% 25.5% 32.7% 43.1% 23.9% 25.7% 31.5%	55.2 47.3 61.4 71.4 62.5 48.5 71.2 70.4 65.8

The pioneering work in family planning was almost entirely done by non-governmental, voluntary family planning associations formed by enlightened volunteers concerned about the effects of continual childbearing on the health of women. While the history of organized contraceptive services goes back to the 19th Century, growth of public and private interest in family planning has been very rapid during the last 15 years. Before 1960, there were 32 private family planning associations and only four government programmes. By 1965, 28 more associations were formed and six more governments had started national programmes. Since 1965, the growth of family planning has been even more rapid. This edition of Family Planning in Five Continents lists some 120 associations and 78 official established government programmes, with 16 more governments providing some family planning services. But there are still 38 countries — mostly in Africa — where no organized family planning services are available.

The first organized family planning activity was started in the Netherlands with the foundation of a family planning association in 1881. Much of the earlier pioneering work was motivated by concern for the ill-health and mortality caused by too closely spaced pregnancies and childbearing and by illegal abortions. In Britain and the United States of America family planning services were also demanded by women's emancipation groups not only as a health measure but as a basic human right as well.

The rationale behind the surge of interest in the 1960s included all these factors but also another important element which had a broader impact on government policies. This was a wide-stread realization that high rates of population growth had serious implications on efforts to develop the economy and raise living standards. Many family planning programmes in the 1960s, especially in Asia and some African countries, started with a demographic objective: to decrease the population growth rate through a significant decline in fertility:

By 1974, when the World Population Conference met at Bucharest, very few family planning programmes had reached their goals. Experiences in many parts of the world had shown the need for integrating family planning education and services with other development efforts to provide the most meaningful and acceptable services to the people. The relationships between family size and major global issues such as the food shortage, malnutrition, environmental degradation, unemployment and the lower status of women are more and more widely recognized by development workers. Organisations and individuals working towards bringing about a better quality of life for people, look for ways in which all their efforts can be combined to achieve this common objective.

Experiences in many parts of the world have also pointed to the need for more extensive educational and contraceptive delivery services than the aiready over-burdened health network can provide. Family planning in the 1970s is characterized-by-a much broader approach to community-based services. Small projects to make contraceptives available outside the clinics have led the way to large scale community-based distribution programmes in many countries. These include better and wider use of para-medical personnel, traditional birth attendants and extension workers who are in day-to-day contact with the people.

The accoptance of the World Population Plan of Action at the Bucharest Conference is a confirmation of a belief shared by 136 governments that family planning is a basic human right and that to provide people with the means to enjoy this right is a fundamental duty of governments.

Africa

	? Pegion	Population in 1976	Population in 2000	Population Growth Rate (1970-75)	Births per 1000 (1970-75)	Deaths per 1000 (1970-75)	Population Under 15 (1975)	Lifo Expectancy (1970-75)
•	Africa	413,183,000	813,119.000	2.6%	, 46.3	19.8	44.2%	47.3

Despite the slow start of family planning activities in Africa, there has been an accelerating increase in the interest of governments in family planning during recent years. Fifteen African governments now have officially established family planning programmes and 16 others either provide some services, usually through the maternal and child health network, or support activities of private family planning associations or individual doctors. But people living in 19 countries with a total population of about 64 million still do not have access to any organized family planning services.

Voluntary associations, which now number 24, have set the pace in family planning in some countries, often under difficult conditions, and have carried the sole responsibility for provision of family planning education and services. In some other countries however, government interest in family planning has started without the stimulation of a private association although influenced by the international community. Where both public and private sectors are active in family planning, voluntary associations work with governments to complement the national programme.

Family planning in Africa has been characterized by concern about the effect on families, particularly mothers and babies, of large numbers of children born in rapid succession. The objective of most African programmes is to improve the health of mothers and children by offering services for the spacing of pregnancies. In many parts of the continent this means replacing traditional social customs for child-spacing with reliable contraceptive methods. However, other social norms encourage large numbers of children as a source of parental pride and old age security.

Development of family planning activities in Africa shows significant regional differences. Three of the five north African countries — Egypt, Morocco and Tunisia — have well-established national family planning programmes, all with declared policies to reduce the growth of their populations. In sub-Sahara Africa, on the whole, English-speaking countries have longer histories and more extensive services in family planning than the Francophone countries. Until quite recently, French-speaking countries have been reluctant to encourage family planning and, in most, the French 1920 anti-contraceptive law is still in force. Now, however, governments in Benin, Mali, Madagascar, Togo and Zaire are showing active interest in the promotion of family planning. In Mali, for example, the 1920 law was repealed in 1972 when a family planning programme was started.

Although Africa has the second highest population growth rate in the world, after Latin America, most governments do not see over-population as a problem. On the contrary, under-population, low population densities and sterility cause much greater concern. Demographic statistics are still scarce and unteliable in many African countries. The African Census Programme, supported by the United Nations Fund for Population Activities, will provide population statistics for many countries for the first-time. Available data however, indicate that, in 24 countries population is growing at a rate of 2.5 percent or more and in seven of these at 3 percent or more. An even greater increase in population can be anticipated before the growth rate finally starts to slow down as inderovements in health services will lead to a reduction in death rates.

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Population Growth rate Births per 1000 Deaths per 1000 (1976) (1970–75) (1970–75)

PALGERIA

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No official policy but MOH programme to encourage wider spacing of births through 30 clinies in MCH centres and maternity hospitals. Abortion legal on medical grounds. IPPF has provided training, contraceptives and literature, UNFPA, WHO, UNICEF, SIDA, Population Council and Ford Foundation provide assistance.

ANGOLA

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	CADADA COLO, EL POPUNO, ESPANA PROCESSA EN A			

No official policy but government allows FPA to provide services at MCH centres and at its own clinic which in 1975 recorded 184 new and 368 continuing acceptors. FPA, founded in 1972, IPPF member in 1975, respectivates on f&E, Abortion legal on medical grounds. IPPF grant to FPA. Assistance from Pathfunder Fund, FPIA, Oxfans and WAY.

BOTSWANA

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Government programme since 1971. National Development Plan for 1973-78 calls for tapid expansion of substitutions feeling feeling feelings part of MCH. Services will be offered at 24 hospitals, 8 health centres, 90 clinics and 178 health posts by 1978, 8–9% of reproductive age population estimated to be reached, 8,222 new acceptors (72,3% recruited at roral clinics) and 23,500 repeal visits in 1975—orals most popular. Government, an affiliate IPPF member since 1971, also carries out I&E and training, IPPF grant to government. Assistance from UNFPA, UNICEF, WHO, NORAD, UKODAI and USAID. Government grant to IPPF

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No official policy or programme. At Government request IPPF supported a dector at Bojumbura in a paint project offering Ip as part of MCH until 1923, Limited fivervices at some mission hospitals. Assistance from WHO, USAID and Prehinder fund.

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Government pro-natalist but interested in fp as part of MCH. Services provided at University hospital at Yaounde since 1975 on an experimental basis. Provision of public information prohibited. Abortion legal on medical grounds. Limited assistance to individual doctors and nurses from IPPF, UNFPA, USAID, Pathfinder Fund, CWS, Ford Foundation and Population Council.

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No organized sp activities but government interest in sp and sex education. Limited services at Paia hospital.

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No organized in activities but some official interest. Some doctors give in advice. USAID assistance for MCH/in clinic.

CHAD

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No organized IP activities. Advice available from some doctors. French Government support to demographic research and Population Council support to a KAP Study by the lastitute National Tchadien.

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No organized fp activities. A small FPA was founded in 1969 but is now mactive.

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No organized ip activities but some interest in government circles.

13

Growth rate Deaths per 1000 Population . Births per 1000 (1970-75) (1970-75) \$(1976). (1970-75)

Deaths per 1000 Population Growth rate Births per 1000 (1970 - 75)(1970-75) (1976) 11970-751

•EGYPT, ARAB REPUBLIC OF

38,429,000	2.4%	35.5 (1974)	12.4 (1974)
30,427,000	4,470	13.3 [17]	12.7 [17/7]

Government programme since 1965. Target to reduce growth rate to 1.1% by 1982. Services at 3,031 fp centres; orals most popular followed by IUD. Government also operates 1&E and training programmes. FPA, founded 1958, IPPF member 1963, complements national programme and has 437 family planning centres of which 159 are in rural areas. 72,250 new acceptors and 202,438 continuing acceptors in 1975. FPA also runs innovative projects to serve as model at the national level. Abortion only permitted to save life of mother but an estimated 123 illegal abortions per 1000 live births. IPPF grant to FPA. Assistance from UNFPA, UNICEF, IDA, IDRC, CWS, Ford Foundation and Population Council.

EQUATORIAL GUINEA

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No organized fp activities.

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No official policy but government does not object to fp as part of MCH. FPA, founded in 1966, IPPF member in 1971, was recognized by government in 1974. Its services are integrated with government and non-government health centres and it makes supplies available to 174 outlets. Of these, 60 had 8,127 new and 46,930 continuing acceptors in 1975, FPA also trains doctors and paramedics from government and mission hospitals and rural centres and runs education programme in schools and integrated adult education projects. Advertisement of contraceptives illegal but no restrictions on sale. Abortion permitted if life or health of the mother is endangered. IPPF grant to FPA. Assistance from UNFPA, USAID, SIDA, FPIA, Pathfinder Fund, Population Council; World Education and World Neighbors.

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No organized fp activities. WHO runs basic health programme including MCH.

OTHE GAMBIA

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á	520,000	- 1 . N i	1.9%	ŀ	43.3	 	24.1	
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Policy to integrate fp with MCH under preparation. Government allows FPA, founded in 1969, IPPF member 1971, to use its health clinics, provides personnel and publicity for -FPA's work and permits importation of contraceptives and supplies duty free. FPA runs 5 clinics and its staff visit outlying government clinics. 3,610 new and 3,802 continuing acceptors in 1975 - orals most popular. FPA extending its activities in rural areas. Also 1&E and training. IPPF grant to FPA. Assistance from UNFPA, UKODM, FPIA, 1'a ander Fund, Population Council and University of California.

• GHANA

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Government policy and programme in 1970; target to reduce population growth rate to 1.7% by year 2000. Fp information and services offered through 189 clinics run by Govern ment, FPA and Christian Council. 35,000 new acceptors in government clinics in 1975. FPA founded in 1966. Thember 1968, concentrates on I&E and rural fieldwork. 20,037 new accent was 2,000 per period of family life. education programmes, we conducted in 26 schools and youth organizations. Christian Council of Ghana runs 12 chars, operates mobile clinics from six rural centres and a family life education programme and family counselling service. IPPF grant to FPA. Assistance from UNFPA, ILO, UNICEF, UKODM, USAID, Ford Foundation, FPIA, IASSW, Pathfinder Fund, Population Council, Rockefeller Foundation, WAY and World Neighbors. Government grant to IPPF.

GUINEA

4 507 000	1 10		10.0
4,327,000	2.4% 4	0.0	.2.9

No organized fp activities.

GUINEA-BISSAU

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534,000		1.5%	40.1	0		25.	

Government interest in fp and sex education. Plans to set up a family health centre for integrated MCH/fp with UNFPA assistance.

IVORY COAST

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100	6,673,013 (1975)	2.5%	45.6		20.6

No organized fo activities but some medical personnel interested in encouraging childspacing. Contraceptives available in limited supplies from pharmacies, hospitals and clinics Abortion legal on medical grounds.

Population (1976)	Growth rate (1970–75)	Births per 1000 (1970-75)	Deaths per 1000 (1970-75)
•KENYA /.)		
13,701,000	3.3%	48.7	16.0

Government programme since 1966. Five year ip programme launched in 1973 - target to reduce growth rate to 3% by 1978 and to recruit 640,000 new acceptors. An average of 4,614 new and 20,745 continuing acceptors per month at 381 clinics. FPA, founded in 1961, IPPF member in 1963, concentrates on I&E and training, runs 8 clinics with 2,504 new and 18,042 continuing acceptors in 1975 — injectables most popular, FPA also operates I mobile units for government and runs the Family Welfare Centre, a training centre for African ip personnel, in Nairobi. Abortion legal on medical grounds. Assistance from UNFPA, UNICEF, WHO, IBRD, IDA, DANIDA, Federal Republic of Germany, Netherlands, NORAIL SIDA, UKODM, USAID, FPIA, AVS, Oxfam, Pathfinder Fund, Population Council, PSI and Rockefeller Foundation. IPPF Africa Regional (** in Nairobi.**)

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Government objective to ensure provision of education and facilities for sp and to reduce population growth from 2.2% to 2%. FPA was founded in 1968, closed by Government and reopened and became IPPF member in 1971. MOH allowed FPA to operate in health facilities in 1975. FPA offers services in all nine districts through 10 clinics and had 3,015 new and 2,714 continuing acceptors in 1975. Government has relaxed law to permit nurses to prescribe hormonal contraceptives. IPPF grant to FPA. Assistance from UNFPA, UNESCO, USAID, UKODM and University of California.

LIBERIA

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Government health policy in 1973 recognized fp as part of socio-economic development. Plans for integrated MCH/fp services. FPA, founded in 1956, IPPF member in 1967, runs 9 clinics and provides services for fp, nutrition, and MCH with 3,483 new and 8,038 continuing acceptors in 1975, majority orals. Also provides supplies to other clinics on request and carries out I&E work. Abortion fegal on medical grounds. IPPF grant to FPA. Assistance from UNFPA and USAID.

LIBYA

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No organized for services; official policy to increase population. Interest in health aspects of fp growing among medical and para-medical personnel. Sale of and prescriptions for contraceptives illegal except for medical reasons. Abortion illegal but punishment may be reduced if pregnancy is illegitimate. IPPF has provided some training for medical and paramedical workers.

17

Population Growth rate Births per 1000 Deaths per 100	
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(1976) (1970–75) (1970–75) (1970–75)	4

OMADAGASCAR, DEMOCRATIC REPUBLIC OF

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1.0	0,203,000	4.770		JU.2	1	1.1 ± 0.00
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Government now favourable towards ip within MCH. Ministry of Population set up in 1976 and FPA; founded in 1967, IPPF member in 1971, represented on National Commission on Population, FPA ran 8 clinics in 1975 with 35,000 visits. Advice and services limited to married women with 4 or more children who have their husbands' consent. French 1920 anti-contraceptive law still in force and abortion illegal. IPPF grant to FPA. Assistance from UNFPA for demographic survey.

MALAW

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5,0 000	^2.4%	47.7	23,7

NG organized for activities as government is pro-natalist but for advice available from some doction and hospitals. Publicity for contraceptives prohibited, IPPF has supported a baby clinic at a mission hospital near the capital, Zomba. Assistance from USAID for MCH extension project and World Neighbors.

MAL

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П									
	5,842.0								

Government pilot programme since 1972. Plans for MCH/ip integration announced in 1974 and Family Health Division created at MOH; target to set up 23 clinics by 1977. FPA formed in 1972, IPPE member in 1975, ran 8 rural clinics and a pilot centre in Banjako in 1975. French 1920 anti-contraceptive law repealed in 1972. Pilot programme supported by IDRC. IPPF provides supplies to FPA. USAID developing a pilot project of rural health delivery in two rural areas and UNFPA running family health project with fp component from 1975–79. Assistance also received from Pathfinder Fund.

MAURITANTA

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	1,310	,000,		2.	0%	44.8		24	.9

No organized for activities; government against any attempts to control population growth; Orals available in drugstores and MCH centre in Nouakchott provides contraceptive advice for medical reasons. USAID assistance for a MCH clinic.

Births per 1000 Deaths per 1000 Growth rate Population (1970-75) (1970-75) (1970-75) [1976]

Births per 1000. Deaths per 1000 Population Growth rate (1970-75) (1970-75) [1976] 11970-751 •

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	865,500 (1975)	1 1 0	(%(1974)	25.1719	1761	7.7	/19741
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1: 10	The second secon		The second secon				

Government programme since 1972 with target to reduce birth rate to 20/1000 by 1975. Services available free of charge through 82 clinics and 45 supply centres mostly in hospitals. dispensaries and welfare centres. FPA, founded 1957, IPPF member 1969, had 879 new and 2,87% continuing acceptors at its 2 model clinics in 1975. It concentrates on I&E and training and plans to launch a CBD project and a sterilization project. A RC group, Action Familiale, teaches rhythm method and runs a sex education programme in schools since 1967. Family allowances decreased for families with 3 or more children. Age of majority reduced to 18 in December 1975 and may cause changes in the attitude to teenage marriage. IPPE grant to FPA, Assistance from UNFPA, UNDP, UNICEF, WFP, UKODM, USAID, FPIA and AVS: Government grant to IPPF.

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Government experimental programme since 1966, and generalized programme since 1968; policy to integrate ip in basic health services. Fp services at 70 urban and 176 rural health cerities FPA, founded in 1971, IPPF member same year, plays a complementary I&E role to national programme and concentrates on youth and rural areas. In 1975 there were 6,652 new and 37,666 continuing acceptors at 6 FPA clinics. 4 more clinics opened in 1976. Abortion legal on medical grounds. IPPF grant to FPA. Assistance from UNFPA, UNICEF USAID Pathfinder Fund and Population Council.

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000 1210		2 30%	431		- 20.1
9,454,000	Lat	4.370	7 77.1	A 7454A 15	, 401.

No organized for activities.

NAMIBIA (SOUTH-WEST AFRICA)

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	852,00	00 (1974) *	2.2%	45	5	-23.2	

Health department runs a comprehensive health service which since 1972 includes provision of spervices at 35 clinics and hospitals each with a trained nurse in charge. Trained nurses provide services to people in their area and 8 Community Health Nurses have been trained to form a nucleus of fp educators.

NIGER

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	4,719,000	2.7%	🔨 52.2		1 ** ** ** ** ** ** ** ** ** ** ** ** **
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No official policy and no organized ip activities. Advice on child-spacing available privately A few urban dispensaries and pharmacies provide contraceptives at high prices, French 1920 anti-contraceptive, law still in force and abortion permitted only to save the life of the mother. USAID and Population Council have provided some assistance.

ONIGERIA

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National Population Council established in 1975 to advise on population policy. Government plans to integrate sp into national health service. FPA, sounded in 1964, IPPF member in 1967, runs 61 clinics with 27,162 new acceptors in 1975. Other activities are 1&E and rural fieldwork, particularly in northern states. Population Council has made substantial grant to FPA until government takes over FPA activities. Government White Paper on education describes early marriage as a social malaise. Abortion legal on medical grounds, IPPF grant to FPA. Assistance from UNFPA, UNESCO, Finland, IDRC, UKODM, USAID, Ford Foundation, Pathfinder Fund, Population Council, Rockefeller Foundation and World Neighbors. Government grant to IPPF.

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No official policy of programme. FPA, founded in 1966 and financed by French Government provides ip services at 11 clinics. More than 25,000 women have accepted ip. Orals and injectables most popular. RC group teaches thy thm method. French 1920 anti-contraceptive law has been repealed and the new law encourages local government support for fp. Abortion is common although illegal. IPPF provides technical assistance and supplies.

RHODESIA

Government programme since 1966 through MCH. Services available from approximately 570 locations - FPA clinics (33), government hospitals and health centres, mission hospitals. mines and estates. 7% of population at risk estimated to practise contraception and there are more than 36,000 attendances at clinics. Government runs a field agent' scheme to distribute orals to women in remote areas. FPA, founded in 1957, has about 10,000 monthly attendances at its centres. It also provides I&E and training. Working party on Population Education set up within MOE. Abortion illegal except to save the life of the mother. IPPE has provided assistance to FPA. Assistance from Oxfam and World Neighbors:

 Population
 Growth rate
 Births per 1000
 Deaths per 1000

 (1976)
 (1970-75)
 (1970-75)
 (1970-75)

RWANDA

4,321,000 2.7% 50.0 - 23.6

Government opposed to fp except by methods approved by Catholic Church, although in 1968 it decided that the concept of child spacing should be incorporated into health education. Fp advice available from Afew doctors, IPPF has provided some support for training. Assistance from Pathfinder Fund, Oxfam and USAID.

O SENEGÂL

5,085,000 2.4% 47.6 23.9

Government plans to formulate policy and to start to programme appounced in speciment 1971. Girst service: limited inban areas. Government alternations a pilot MCH/family weitale centre in Dakar. FPA was founded in 1970 and closed down in 1971. A new FPA was founded in 1974. A Pathfinder Fund clinic and a private clinic in Dakar provide services. Abortion legal on medical grounds. IPPF, UNFPA and USAID have provided assistance.

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Government policy announced in 1975 to integrate fp with health services. A special IPPF project provides services at 7 clinics with 953 new and 3,280 continuing acceptors in 1975. UNFPA is considering support to government for integration of MCH/fp and family welfare education. Assistance from Pathfinder Fund.

OSIERRA LEONE

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No official policy but government attitude increasingly favourable to 1p within health service and support to FPA, founded in 1960, IPPF member 1968. FPA pioneered 1p through its work in I&E and hopes to integrate its clinic services with government MCH services. 3,483 new and 8,083 continuing acceptors at 12 FPA clinics in 1975. IPPF grant to FPA. Assistance from UNFPA, FPIA. Pathlinder Fund, Population Council. Rockefeller Foundation.

SOMALIA

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	3,258,000

No organized fp activities.

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ERIC

Population	Growth rate	Births per 1000	Deaths per 1000
(1976)	(1970-75)	(1970-75)	(1970-75)

• SOUTH AFRICA

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1 25,471,000 <i>(1975)</i>)	12.0	<i>A</i>	12.5	
1 23,771,000 [2773]	2.070	42.9	40	13.3	4.7
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Government programme through health authorities in all provinces which serve over 2,500 acceptors a month. Five-year national fip programme launched in 1975 to reach 50% of fertile couples. FPA founded in 1932, IPPF member in 1953, receives government funds and concentrates mainly on I&E and training but still involved in running clinics. Sterilization is allowed and abortion is legal on medical and humanitarian grounds. Some assistance from Population Council and World Neighbors.

OSUDE

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Government interest in fp and support to FPA, founded in 1965, IPPF member in 1971. National Council for Social Welfarchas a sub-committee on fp. \$291 new and 7,174 continuing acceptors in 1975 at 16 FPA clinics in Khartoum and 14 clinics in the provinces, located in MCH centres; majority orals, EPA concentrates on 1&E and training. Abortion legal on medical grounds, IPPF grant to FPA. Assistance from UNFPA, UNESCO, Pathfinder Fund, WHO, FPIA and IASSW, Government grant to IPPF.

O-SWAZILAND

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MOH plans for integration of fp into existing MCH and well baby programmes and for three year project for setting up new health delivery points throughout the country with emphasis on distribution of contraceptives and post-partum advice on child spacing. IPPF and UNFPA are to provide supplies and assistance in training personnel.

Government offers services through rural health centres and permits mission health facilities to provide fp within MCH. It has given FPA, founded in 1959, IPPF member 1969, responsibility for I&E, training and commodities and supplies. FPA also provides clinic services in capital and surrounding area, trains personnel and provides supplies for more than 100 government MCH/fp centres: 5,309 new acceptors in 1975 at FPA clinics in Dar as Salaam and 15,000 acceptors outside the capital. Two new legal changes could lower birth rate: abolition of tax allowances for children; three months maternity leave for married or unmarried working mothers every three years only. IPPF grant to FPA. Assistance from UNFPA, FAO, WHO, Finland, IDRC, NORAD, USAID, Oxfam, Population Council and Rockefeller Foundation.

Population		Growth rate	Births per 1000	Deaths per 10	00
(1976)	1.	(1970-75)	(1970-75)	. (1970-75)	7

Births per 1000 Growth rate Deaths per-1000 **Population** 119761 11970-751 . [1970-75]. (1970-75)

OTOGO

2,312,000 2.7% 23.3 -

No official policy or programme but government has shown in the intends to offer services in MCH centres in rural/areas. FPA formed in March 1975, sees I&E as its main role but provides services in Lome. IPPF grant to FPA: Assistance from UNFPA and USAID. The Onaker Service in Lome, Pathfinder Fund and Population Council have also provided some assistance.

'AIRE'

118,000 45,2 W.5 2.5%

Government statement in favour of fp in 1973 and a National Council for Desired Births set up in 1975. A MCH/fp project at three locations — the main one at Mamayemo General Hospital in Kinshasa with 2,500 new acceptors in 1975. Fp to be fully integrated with community health services, IPPF grant in 1976, USAID assistance for expansion of MCH services. Government of Belgium, DANIDA, IDRC and FPIA also provide assistance.

TUNISIA

5,893,000 2.3% 33.9 (1974) [3.8]

Government experimental programme since 1966, generalized programme since 1968; target to reduce birth rate to 28/1000 by 1976. Services through 420 fp centres and mobile chaics. 58,052 new acceptors in 1975, nearly half tubal ligations and abortions. TUD most popular 13.4% of women of childbearing age estimated to be practising contraception. FPA founded in 1968, IPPF member in 1969, collaborates with government and is responsible for I&E. Also runs model clinic at Monfleury which is used for regional and local framing (17,642) consultations in 1975) and three other clinics. Social welfare and civil laws on polygamy, age of marriage and family allowances have been modified to encourage lower fertility. Abortion available on request in first trimester. IPPF grant to FPA. Assistance from UNFPA, UNESCO. H.O., UNDP, UNICEF, FAO, WHO, IBRD, IDA, Belgium, CIDA, Netherlands, Germany, NORAD, SIDA, USAID, Ford Foundation, Population Council and Pathfinder Fund. Government grant to IPPF, IPPF Middle East & North Africa Regional Office in Tunis.

• ZAMBIA

515 5,181,000 20.3

Government instructions in 1974 that medical services should provide fp information and services as part of MCH. Services available at district and provincial hospitals. FPA, founded in 1971, IPPF member in 1973, concentrates on l&E and provides contraceptives free-ofcharge to government health facilities. 16,052 new and 20,633 continuing acceptors in 1975 at 23 clinics - majority orals and over 3,000 injectables. Abortion legalized in 1972 on medical prounds with the consent of 3 doctors. IPPF grant to FPA. Assistance from UNEPA FAO, USAID, IASSW, Pathfinder Fund and Population Council-

UGANDA

11.701,000 2.9%

MOH instructed all hospitals and clinics to offer fp services in 1976. FPA, founded in 1957. IPPF member 1964, runs 24 clinics located at government and mission hospitals with 4,992 new acceptors in 1975. FPA has I&E programme and provides training for medical personnel Maketere Medical School and Catholic Medical Bureaux also provide ip services. Ministry of Cooperatives and ILO have embarked on a family life/population education programme and first clinic opened in Western Uganda. IPPF grant to FPA. Assistance from UNFPA, FAO, ILO, DANIDA, USAID, Oxfam and Population Council.

UPPER VOLTA

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No organized fp activities. Two MCH centres built with USAID funds. Population Council and WAY have provided assistance.

America

Region	Population in 1976	Popúlation in 2000,	Population Growth Rate (1970-75)	Births per 1000 (1970-75)	Deaths per 1000 (1970-75)	Population Under 15 (1975)	Life Expectancy (1970-75)
Latin America	333,068,000	619,929,000	2.7%	36.9	9.2	42,0%	761.4
North America	239,071,000	269,199,000	0.9%	•16.5	9.3	25,5%	71.4

In almost all countries in the Americas, people have some access to family planning services. Of the 43 countries listed in this section of Family Planning in Five Continents, 40 have family planning associations and 25 have government programmes. Eleven other governments support the work of voluntary associations, although some of them have official policies to increase the birth rate.

North America was one of the areas to pioneer family planning and today services and facilities are widely available. However, Latin America has a relatively short family planning history, both public and private activities in most countries having been initiated in the late 1960s. Government interest in family planning in most Latin American countries first started as a support to the work done by private associations and has gradually led to a national programme. As in Africa, most programmes aim at improving mother and child health standards but widespread illegal abilition also causes great concern. In many parts of South and Central America family planning remains a highly sensitive issue both from political and religious points of view.

Significant changes in the official government attitude towards family planning have taken place during the last few years. In 1973, the Mexican government reversed its policy on family planning and launched a nation-wide programme. Family planning was stated as a basic human right in the Constitution. The Brazilian Government announced at the Bucharest Conference in 1974 a new policy to provide family planning information and services to all its citizens and plans are in progress to launch the programme. In September 1976 a new policy on population and family planning was announced by the Peruvian government. In

contrast, demographic policies to increase population have led to restrictions in family planning activities in Argentina. In some other countries, while there is an official policy to increase the birth rate, governments recognize the human right of couples to decide on the number and spacing of their children and are still providing family planning services or giving support to activities of private associations.

Despite the increasing involvement of governments in family planning, voluntary associations continue to carry significant reponsibilities with well defined roles within the national programmes, usually in the field of information, education and training. An important area of activity for family planning associations is provision of contraceptive services outside the clinics. Community leaders, development workers, pharmacies and satisfied acceptors take part in the effort to make contraceptives more feadily available to the people. Sixteen associations in Latin-America and the Caribbean have either established community based distribution programmes or are carrying out some type of CBD activities.

The effects of the rapid growth of population are seen in the very high proportion of young people in almost every Latin American country, which severely affects education facilities and employment opportunities. A high urbanization rate resulting in the rapid development of shanty towns also makes the population problem more visible. Although gradual fertility declines have started to take place in some countries, the high birth rates, and the relatively low death rates result in the highest rates of population growth in the world; in eight countries the rate is over 3 per cent and in another ten countries it is 2.5 per cent or more.

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ARGENTINA

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Continues in appropried policy in Mayde 1975 to Instant population to 30 million by 2000. huncles to estimate and compelled FPA (Hooded in 1966, IPPF member 1969) to servery in programme. FPA had by climas, most located at principal glassimment and active easy to ecotable lips post both. Elegal and restriction on increas, inapplicative and distribut in all every step to at. Abustion legal to the city of making and in the case of rape. If the arani to 174. Askrines finna Peer Franciskon, Pepikatan Codunyi, Bushkishko Polondatkin aid Tökke kortúrlada.

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parentment plans in injugate for a beside private FMA. Founded in 1988, APM member 1907, second to be adequate to preference 2,177 may and 15 Min communic acception is all PPA Chiest in 1975 – impulier walls 1994 with CNO project for conducts. hose existing 1978 and like sex subsection and theiring programmes. Trained market halfanara barri 1908. Alegetina feral en mallael ereunda 1999 aunt la FPA. Auditance for Cappa direction on part

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Covernment provides up as part of health services since 1937 and it a member of IPPF since 1957. Services at one clinic with 550 new and 1,348 continuing acceptors in 1975. Orals thirst papalar. Nex education principance to be set up in admids to reduce illegithmacy rate.

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Generalment MCIVIp programme in 1976, target to record 9% of women in lettile sizes." FPA, founded in 1974, IPPF member 1975, given inspansibility for administrating MCH clinics, IAE and evaluation of national programme. FPA trains its own and government personnel and non-point CDD project for enadoms. Loss new acceptors in 1975 at 6 FPA clinics – 2 in government hospitals. Abortion and sterification illegal, IPPF grant to FPA: Assistance from UNFPA, USAID, Pathfinder Fund, Population Council, WAY, Meanurite Central Committee and World Neighbors.

a BRAZIL

Α	financium ner manyen pasyment en terpre	an padimin nimen in miniment in	Petri etyt illusistadinuutsia ysissat sur	na amerika danga puntukan terapatan dangan	STATE AND ASSESSMENT	and the second second section of the second
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Concernment annumered policy to provide in information and services in 1974 and plant are in progress to launch official to programme FPA, founded in 1965, IPPF member 1967; works closely with state and municipal governments and provides technical/financial assistance to CBO projects in five states. FPA policy to move from choical to CBO activities and to transfer chaics to inumbered governments since 1975, 203,000 new, and over 1 million continuing, FPA acceptors in 1975 at 76 choics and through CBD projects. FPA also runs dynamic I&E and truning programmes. Attom 3.3 million women buy mals over the counter. Prescription requirements for airsis telescel in October 1976. Abortion legal only to save like of mother. 1994 grant to FFA. Assistance from UNFPA, IDRC, DANIDA, AVS, CWS Find Foundation, Pathfinder Fund, Population Council, 1988, Rockefeller Foundation, Tinker Foundation and World Neighborg

. CANADA

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Po services provided by most previoual governments, Federal previouser programme in 1&E and training since 1970, FPA (isonded in 1963, HPF member the same year, bus 78 snumber associations which provide services, I&E and connsolling, FPA also active in fund rating, 80% of acceptors through private dectors. Abortion legal on medical grounds: 14 abortions per 100 live births. Government gives international assistance and grants to IPPF

Angel and all and an experience of the second state of the second	بهي ود دود دودونها و ودوده المستحديد المادة الم	والراب والراب والمراب في والمهوري والمعالية والمعالمة والمعالمة والمعالمة والمعالمة والمعالمة والمعالمة والمعا	and the state of the same of the same of	
Population	Growth rate	Births per 1000	Deaths per 1000	<u></u>
(1976)	-(1970-75)	[1970-75]	(1970 - 75)	
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 Population
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Government programme since 1967, Ip services as part of MCH on a national scale. FPA, founded in 1962, IPPF member 1963, supports national programme with I&E, training, research and evaluation and contraceptive and other supplies. FPA provides ip services in 444 hospitals and MCH centres and is responsible for all ip services in northern areas. 222,094 new and 214,981 continging FPA acceptors and 71,493 female sterilizations in 1975. Midwives allowed to provide orals, insert IUDs, and treat minor side-effects. Abortion legal on medical grounds only but wide-spread. Sterilization allowed on socio-medical grounds. MOH runs sex-education programmes in schools. IPPF grant to FPA. Assistance from UNFPA, WHO/PAHO, UNICEF, USAID, AVS, Ford Foundation, Pathfinder Fund and Population Council.

◆COLOMBIA*

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Government programme since 1967, MCH/fp services at more than 1,400 centres in hospitals and health posts. FPA, founded in 1965, IPPF member 1968, runs 48 clinics with 67,147 new and 113,762 continuing acceptors and 934 male and 2,443 female sterilizations in 1975. FPA CBD programmes in rural areas since 1970 and orban areas since 1973; 72,622 new acceptors in 1975 through 755 urban distribution and 493 rural posts. FPA also runs l&E and sex education programmes and trains its own and other organizations' staff. Trained nurse/midwives allowed to insert IUDs. Abortion legal only to save life of mother but widespread. IPPF grant to FPA. Assistance from UNFPA, UNESCO, WHO/PAHO, UNICEF, AUSAID, AVS, CARE, FPLA, Ford Foundation, OXFAM, Pathfinder Fund, Population Council, PSI, Rockefeller Foundation, WAY, World Education and World Neighbors.

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Government programme since 1968; 7 organizations engaged in ip. Services at 100 MOH health centres and hospitals, 114 rural outposts and 32 social security centres, 30,279 new and 174,000 continuing acceptions in 1975. FPA, founded in 1966, IPPF member 1967, responsible for administering and providing contraceptive and other supplies to national programme, training, research and evaluation. FPA also runs 2 clinics with 731 new acceptors in 1975 and a CBD project through 176 distributors, including pharmacies, with 12,000 new acceptors. IPPF responsible communications training centre in San Jose with UNESCO assistance. Nurses allowed to insert IUDs under analysis al supervision. Abortion legal on medical grounds. IPPF grant to FPA. Assistance from UNFPA, WHO/PAHO, UNICEF, USAID, APHA, AVS, CWS, FPIA, Ford Foundation, Population Council, Tinker Foundation, WAY and World Education.

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• CUBA

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٠,	9,682,000	1.8%/1970 -74)	22,3 (1974)	5.8 (1974)
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Government programme fully integrated with health services. All contraceptive methods, sterilization and abortion available free-of-charge. FPA founded in 1976 to complement national programme. Interest in developing sex education. IPPF grant to FPA. Assistance from UNFPA and SIDA.

•DOMINICA

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Government programme since 1970, integrated with health services. FPA, founded in 1973, CFPA member 1974; responsible for I&E support and contraceptive supplies to national programme. IPPF grant to FPA. Assistance from UNFPA, WHO and UKODM?

•DOMINICAN REPUBLIC

- 4	ATTACHMENT PROPERTY AND ADMINISTRATION ADMINISTRATION AND ADMINISTRATION ADMINISTRATION ADMINISTRATION AND ADMINISTRATION ADM						- 5				
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Government programme since 1968, target to reduce birth rate to 28/1000 in ten years. Services at 312 urban and rural centres with 45,647 new and 61,694 continuing acceptors in 1975. FPA, founded in 1966, IPPF member 1969, responsible for I&E, runs a Radio School reaching 400,000 people; and involved in training jointly with government. FPA runs a model demonstration clinic/training centre with 12,455 new and 14,325 continuing acceptors in 1975. FPA CBD project in 6 provinces with 3,617 new and 5,152 continuing acceptors. Trained num is allowed to insert IUDs and notes auxiliaries prescribe pills. Abortion illegal but widespread and a bill to legalize abortion on certain grounds in Parliament. IPPF grant to FPA. Assistance from UNFPA, UNICEF, USAID, AVS, CWS, FPIA, Pathfinder Fund and Population Council.

• ECUADOR

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Government MCH/fp programme since 1969, services at 238 hospitals, health centres and I sub-centres and 8 fp clinics. FPA, founded in 1966, IPPF member 1967, provides I&E supportate national programme, concentrates on I&E and services to rural areas and on developing new service delivery techniques. FPA ran 4 clinics and a special project for workers and supplied contraceptives to present doctors in 1975 – 6,459 new and 12,165 continuing acceptors. Pilot CBD project half 1,000 oral and 1,700 condom users. Government and other medical and paramedical personnel trained by FPA. Abortion legal on medical grounds only but widespread. IPPF grant to FPA. Assistance from UNFPA, WHO, USAID, APHA, AVS, FPIA, Pathfinder Fund, Population Council, WAY, World Education and World Neighbors.

Population	Growth rate	Births per 1000	Deaths per 1000	
(1976)	(1970-75)	(1970-75)	(1970-75)	

• EL SALVADOR

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6 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	1 010	10	0.0 (1000)
4,239,000	3.1%	40.1 (1975)	8.0 (1975)
4,407,000	J. 1. 10] .TV.) [177J]	[U,U (1372)
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Government programme since 1968, policy announced in 1974. MCH/fp services at more than 100 clinics with 60,000 active acceptors and at 60 social security clinics. MOH issued liberal sterilization guidelines and performed 10,000 sterilizations by mid-1975. FPA, founded in 1966, IPPF member in 1969, runs 2 clinics with 4,046 new and 15,715 continuing acceptors in 1975, 1,015 female and 380 male sterilizations. FPA also runs CBD projects through pharmacies and vending machines and an active volunteer motivation programme. FPA training programme taken over by MOH in 1975. Abortion legal to save life of mother and for eugenic and juridicial reasons. Sterilization legal for women with 2-children and/or women aged 30 or more with 1 child. Family life education by MOE, IPPF grant to FPA. Assistance from UNFPA, UNESCO, UNICEF, USAID, AVS. OXFAM, Pathfinder Fund, Population Council and WAY.

OGRENADA

4	V	4.4			٦
ı	96,000	0.5% (1970-74)	26.2 (1974)	7.5 (1974)	ŀ

Government policy and plans to integrate fp in health services announced in 1974 but not implemented as yet. FPA, founded in 1964, CFPA member in 1973, provides comprehensive MCH/fp services at 5 government health centres, runs 5 supply centres and distributes non-clinical contraceptives through fieldworkers. A total of 2,805 new and 11,066 active FPA acceptors in 1975. FPA also provides I&E and training. Abortion illegal. IPPF grant to FPA. Assistance from OXFAM.

OGUADELOUPE

			
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₿ 360,000	1.7%/1970-741	28.0 (1973)	7 3 (1973)
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			121,27

French government supports FPA, founded in 1964, CFPA member 1973. FPA provides services at 2 centres and I&E and counselling through 22, 983 new and 1,383 continuing acceptors in 1975—orals most popular. Liberalization of French Abortion Law applies to Guadeloupe.

GUATEMALA

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Government programme since 1969, services at 250 clinics as part of MCH, FPA, founded in 1962, IPPF member 1969, responsible for clinical services in the capital, I&E and training of its own and government personnel, 9,217 new and 12,595 continuing acceptors, I,604 female and 480 male sterilizations at 9 FPA centres in 1975. CBD projects for orals and sondoms through satisfied users started in 1975 – 1,181 new acceptors in three months. Abortion legal to protect health of mother or in the case of rape. IPPF grant to FPA. Assistance from UNFPA, WHO/PAHO, UNICEF, USAID, AVS, OXFAM, Pathfinder Fund, Population Council and World Neighbors.

Population	Growth rate	Births per 1000	Deaths per 1000
(1976)	(1970–75)	(1970-75)	(1970-75)

AGUYANA

° 808.000	1 '	2 70%	21 /		5.0
900,000.		L.≟/0	36.4	1 1 .	Jij

Government policy to encourage population growth. FPA, founded in 1974, CFPA member 1976, mainly concentrates on I&E. Government request to FPA to co-operate with MCH centres and community development agencies. IPPF grant to FPA. Assistance from WHO/PAHO and WAY.

eHAITI

4,626,000	4 1.5%	35.8	16.3

Government provides services at 18 health posts and plans to expand to 40, mainly in rural areas. Community workers being trained to distribute orals and condoms in selected areas. Abortion illegal. Assistance from UNFPA, WHO/PAHO, USAID, IDRC, FPIA, Ford Foundation, OXFAM, Pathfinder Fund, Population Council, Rockefeller Joindation and UIISC.

OHONDURAS

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Government programme since 1966, services at about 35 centres. Plans to train nurse aids to deliver health services in rural areas, including distributing pills and inserting IUDs, FPA; founded in 1961, IPPF member 1965, runs 2 clinics with 8,781 new and 3,986 old acceptors in 1975. — majority orals. CBD project for orals through satisfied users — 8,920 acceptors in 1975. FPA also responsible for comprehensive programme and runs literacy/fp project. Abortion legal only for the appetitic reasons. IPPF grant to FPA. Assistance from UNFPA, WHO/PAHO, USAID, Pathfinder Fund, Population Council, World Education and WAY.

e JAMAICA

A	12.61.500	1		 -1	
2,058,000	1:5%	30.8	(1974)	7.2 (1974	

Government programme since 1966; larget to reduce birth rate to 25/1000 by 1977. Integration of fp in health services through clinics and community health aids started in 1975. Services at 161 centres, by 2 mobile teams and through CBD project with 172 distribution posts for orals and 422 for condoms. FPA, founded in 1957, IPPF member the same year, concentrates on I&E, especially for youth and runs 2 clinics with 1,684 new and 4,960 continuing acceptors in 1978 FPA also runs CBD project with 2,724 new acceptors. Abortion legal on medical grounds Sex education curricula under preparation, IPPF grant to FPA. Assistance from UNFPA, IBRD, UKODM, IDRC, USAID, AVS, Ford Foundation, IASSW, Pathlinder Fund, Westinghouse Population Center and WAY. Government grant to IPPF

Population	Growth rate	Births per 1000	Deaths per 1000
(1976)	(1970-75)	(1970–75)	(1970-75)

▲MARTINIQUE

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	369,000		1.4%	22.4 (1973) -	6.8 (1973)
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No official policy or programme. FPA founded in 1967.

MEXICO

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- 6	61,196,000	1 (4%	43.4 (1974)	15.4	.8.6 (1974)
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Government policy in 1973 to reach 20% of women in fertile ages (2.4 million) by 1976. For recognized as basic right in Constitution. Services at 688 MOH clinics and clinics of Social Security Institutes. Government also runs active I&E campaign, FPA, founded in 1965, IPPE member in 1967, responsible for services not covered by national programme and provides I&E. 56,835 new and 87,130 continuing acceptors at 98 FPA clinics in 1975. Sex education in primary and secondary schools. Abortion legal on medical grounds and in cases of rape only but widespread. IPPF grant to FPA. Assistance from UNFPA, WHO/PAHO, IDRC, SIDA, USAID, AVS, Ford Foundation, OXFAM, Pathfinder Fund, Population Council, Rockefeller Foundation, Tinker Foundation and WAY.

OMONTSERRAT

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	T.	13,00	1	- (11.1%		24.3 (19	741 1	10.5/1974)	1.
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No official policy but increasing support to fp and FPA, founded in 1966, CFPA member 1973. FPA runs a clinic with 277 new and 345 continuing acceptors in 1975 and an I&E programme. Sex education being incorporated in school curricula. Aportion legal on medical grounds. IPPF grant to FPA.

NETHERLAND ANTILLES

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6	2,1,000	1 10/0 17/0	20.0 (17/3)		· . •	~ { 1 / (u)	
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OARUBA - Government support to FPA, founded in 1970, CFPA member 1973, Runs 2 clinics and provides services through 15 private doctors with 675 new and 1,073 continuing acceptors, 11 male and 164 female sterilizations in 1975. FPA information centre provides counselling and sex education to schools. IPPF grant to FPA.

OCURAÇÃO - Government support to FPA, forbided in 1965, CFPA member 1973. Runs 3. part-time clinics at government health centres, I full-time clinic and part-time clinics in factories – 858 new and 1,168 continuing acceptors in 1975. FPA also active in I&E and carries out sex education programme in schools. Abortion illegal but widespread, IPPF grant to FPA.

AST MAARTEN - Small fp programme by FPA which became CFPA member in 1974. Runs 4 clinics – 3 at government premises, with about 500 acceptors annually

Population	Growth rate	Births per 1000	Deaths per 1000
(1976)	11970-751	(1970-75)	(1970-75)
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ONICARAGUA

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8	2,158,000 (1975)	3 3%	48	3	13.9
.	(4,1,1,1,0,0)	-3/8	. 70	<u>.</u>	17.7

Government programme since 1968, services at 63 health centres; 8 social security outlets and 4 private institutions with 15,502 new and 28,340 continuing acceptors in 1975. FPA founded in 1970, IPPF member 1975, supports national programme in the and trains medical and paramedical personnel, 4,323 new and 2,583 continuing acceptors at 6 FPA. clinics in 1975, FPA also runs CBD project with 4,519 new and 8,032 continuing acceptors in 1975. Abortion legal on medical grounds. IPPF grant to FPA. Assistance from UNFPA, WHO/PAHO, USAID, Pathfinder Fund and WAY

ePANAMA

2.5%/1975/ 5.2/1975) 1 125,000 31.7/1975/

Government MCH/sp programme since 1969 through public health network. Services at 72 centres with 17,624 new acceptors in 1974, FPA, founded in 1965, IPPF member 1969, signed an agreement with MOH to provide less support to national programme and train medical and paramedical personnel, 428 new and 204 continuing acceptors at 2 FPA clinics in 1975. FPA also runs CBD project for orals and condonts - 243 new and 1.101 continuing acceptors in 1975. Son education introduced in schools from primary level since 1975. Abortion illegal. IPPF grant to FPA. Assistance from UNFPA, WNO/PAHO, UNESCO and USA1D.

OPARAGUAY

À	$\sim\sim\sim\sim$	$\sim\sim\sim$	$\sim\sim\sim$	$\sim\sim$
	2,724,000	2,8%	39.8	00
₹	4,1,5 1,000	٠٠/٥٠٠	J/•V	0./

Government attitude pro-natalist but services offered at 27 clinics with about 24,000 active acceptors. FPA, founded in 1966, IPPF member 1969 concentrates on I&E and runs 29 clinics ~ 6 at government premises, 7,575 new and 18,644 continuing acceptors in 1975. CBD project for orals started in 1975. FPA also provides education and services for armed forces and trade unions. Abortion legal on medical grounds. IPPF grant to FPA. Assistance . from UNFPA, USAID, Mennonite Central Committee, Pathfinder Fund and World Neighbors

OPERU

15,277,000 2,9% 41.0 11.9

Government policy announced in September 1976 to provide ip information and services and to reduce birth; ate to 24/1000 by 2000, MCH Institute set up in 1972 to provide ip services. FPA (founded in 1969. IPPF member 1970) agreement with government to be responsible for lag and medical and paramedical training. FPA medical activities discontinued since Jamery 1975. By end of 1973, FPA had 11 clinics in operation at hospitals in the north-didle region. About 45 clinics are run by Catholic Church groups, 21 located at MOH hear centres. Abortion illegal, IPPF, grant to FPA. Assistance from UNFPA, USAID, FEEL Ford Foundation, Population Council and Rockefeller Foundation.

Population	Growth rate	Births per 1000	Deaths per 1000
(1976)	(1970-75)	(1970-75)	(1970-75)

PUERTO RICO

3,066,000 (1974) 2.8% (1970-74) 23.3 (1973)

Government programme since 1967. FPA founded in 1954, IPPF member the same year. Government and private activities integrated and a new fp unit set up in 1974. Since then FPA ceased clinical activities and emphasized I&E, 265 new acceptors at 2 FPA clinics in 1974, 60% of couples in fertile ages practise contraception - about 25% of women estimated to be sterilized. Assistance from US Department of HEW.

IST KITTS NEVIS

66,000* 0.4% + (1970-74) 10.8* (1974) 24.1* (1974)

Government programme since 1971, fp fully integrated with health services. 458 new and 1,733 continuing acceptors in 1975 at 7 MCH/fp centres. Main role of FPA, founded in 1966, CFPA member 1973, to provide contraceptive supplies and I&E support to national programme. FPA also runs a model clinic with 121 new and 417 continuing acceptors in 1975. Literature for family life education in schools provided by FPA. Abortion illegal. IPPF grant to FPA. Assistance from UNFPA and WHO.

ost Lucia

110,000 1.5% (1970-74) 40,9 (1972) 9.3 (1972)

Government announced family life education programme in 1975 and allows FPA to provide services in health centres. FPA, founded in 1967, CFPA member 1974, runs 30 clinics with 1,762 new and 3,256 continuing acceptors in 1975 - majority orals. FPA also active in I&E and sex education. JPPF grant to FPA. Assistance from IDRC

est vincent

94,000 34.4 (1973)

dovernment started MCH/fp programme in November 1975 and opened its first clinic. FPA. founded in 1965, CFPA member 1774, will mainly concentrate on I&E 754 new and 2,052 continuing acceptors in 1975 at 25 EPA clinics - all but one at health centres. EPA active in 1&E, sex education and fieldwork. IPPF grant to EPA. Assistance from UNFPA. WHO PAHO, IDRC and OXFA

SURINAM

434,000 41.6

No official Policy, programme of supposed to fp. FPA, founded in 1969, CFPA member 1973 provides services at 2 clinisand through 4 private doctors - 1 245 new and 2,285 continuing acceptors in 1975 - againty orals. FPA also active a 185. IPPF grant to FPA Populatión Deaths per 1000 Growth rate Births per 1000 [1976] (1970-75) (1970-15) (1970-75)

TRINIDAD AND TOBAGO

1,019,000 6.5 (1974) 24.0 (1974)

Government programme since 1967; services at 77 MCH/fp centres. FPA, founded in 1961 IPPF member the same year, concentrates on I&E, trains its own and government personnel and runs 5 clinics with 3,933 new and 14,599 continuing acceptors and 24 male and 363 female sterilizations in 1975. Midwives allowed to insert IUD's. Abortion legal on medical grounds. Family life education in schools. IPPF grant to FPA. Assistance from IBRD, WHO/PAHO, UNICEF, DANIDA, AVS, OXFAM, Population Council and WAY.

UNITED STATES OF AMERICA

215,832,000 0.8% 14.8 (1975) 9.0 (1975)

Government services through 4,500 government and private family planning facilities, with an estimated 5 million acceptors in 1975, majority orals. Sterilizations increasing - 674,000 female and 639,000 male in 1975. FPA founded in 1917, IPPF member 1952, had 100 clinics with 1,030,000 acceptors in 1975. Abortion declared legal in all states by the Supreme Court in 1973. Extensive sex education, SIECUS main agency. IPPF Western Hemisphere Regional Office in New York. USA is major donor to country programmes and international organisations including IPPF, through USAID and many private foundations eg. Ford and Rockefeller Foundations, Pathfinder Fund and Population Council.

o URUGUAY

1.3% (1975) 2,763,964 (1975) 20*.9(197*3) 9.5 (1973)

Government attitude pro-natalist but allows FPA founded in 1961, IPPF member the same year to run clinics at hospitals and health centres, 6,539 new and 11,441 continuing acceptors at 26 FPA clinics in 1975 - majority JUDs. FPA also carries out I&E and sex education. Higher taxes for contraceptives introduced in 1975. Abortion legal on medical grounds only but widespread. IPPF grant to FPA. Assistance from WHO/PAHO, CLDA and PPFC,

VENEZUELA

11,993.000 (1975 2.9% 37.3 (1974) 6.3 (1974)

Government programme since 1974 as part of MCH. Services at 203 clinics and plans to open 100 more in rural areas. FPA, founded in 1966, IPPF member 1971, handed over its 118 classes to government. Now runs one clinic and concentrates on the and training. Abortion legal on medical grounds, IPPF assistance to FPA. Assistance from AVS. Ford Foundation, Pathfinder Fund, Population Council and Rockefeller Foundation.

36

including Anguilla

CEDIE GOVERNMENT INVOLVEMENT

● GOVERNMENT PROGRAMME ▲ FAMILY PLANNING ASSOCIATION

IPPF MEMBER



Asia

Region	Population in 1976	Population in 2000	Population Growth Rate (1970-75)	Births per 1000 (1970.75)	Deaths per 1000 (1970-75)	Population Under 15 (1970-75)	Life Expectancy (1970-75)	<u> </u>
t Asia ith Asia SR	1,021,974,000 1,282,955,000 257,591,000	1,369,069,000 2,267,266,000 315,027,000	1.725 2.5% 1.0%	26.2 41.9 17.8	9.8 16.7 7.9	32.7% 43.1% 25.7%	62.5 48.5 70.4	

Unlike Africa and Latin America most countries in Asia have launched national family planning programmes in a deliberate effort to slow down the rate of growth of their population. The pressure of population was recognized in India as early as 1951 and many other governments initiated nation-wide programmes in the 1960s. Pioneering work in almost all countries which have national programmes today was done by voluntary family planning associations. The most important goal they achieved was to demonstrate to their governments the need for family planning services. For many, this meant working under extremely unfavourable government policies and under restrictive legislation which often made their activities illegal. The change in government attitudes towards family planning that have taken place in a very short time is a remarkable success for the associations.

In several Asian countries such as Korea, Sri Lanka, Hong Kong, Singapore and Taiwan, birth rates have already shown significant declines but there are also indications that even the most successful programmes have now reached a plateau. New approaches are needed treach the hard-core groups and to eliminate the potential effects on the fertility levels of the increasing number of women in child-bearing ages as a result of the post-war boom. These new approaches broaden the scope of both public and private family planning programmes. While in some countries like India and Sri Lanka more amphasis is placed on an integrated approach which aims at combining all development efforts, a number of other countries try widening contraceptive delivery channels by permitting paramedical and non-medical people to play a more active role in the distribution of mile and other contraceptives and inserting of IUDs. In an innovative project in Bangladesh that midwives are trained in sterilization techniques. Community-based distribution of countraceptives is another approach being tried in an increasing number of countries—assily by IPPF member associations.

There is a growing recognition too, of the restrictive effects of existing laws relating to population and family planning programmes. Many Asian countries are now actively involved in the study of their laws with a view to make the legal reforms that are necessary to remove legal impediments to programmes. Singapore and India have already moved beyond family planning by introducing legislation which restricts some social welfare benefits such as tax reduction and maternity allowances to couples with small numbers of children and gives low priority to large families for government housing and for other benefits

Government interest in family planning is a relatively recent phenomenon in the middle east. With the exception of Iran and Turkey, there are no governmental programmes but in a few countries such as Sinia and the Yemens governments have started to show as interest in the MCH aspect and planning. In nine out of 15 middle eastern countries there is a voluntary family planning association. The most dramatic event in 1975 took place in Saudi Arabia with the government ban on all contraceptives with a six-month imprisonment for their snaughing.

Because of the widely described fertility, mortality and health standard levels between East Asia and South Asia, two separate sets of statistics are given in the table above. Figures for East Asia which includes China, Japan, Republic of Korea and Hong Kong are now becoming closer to the statistics of more developed regions. South Asia has the second highest birth rate in the world but the relatively high death rates make the population growth rate at almost the same evel as in Latin America. However, the largest addition to world population in absolute numbers comes from Asia.

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Population	Growth rate	Births Per 1000	Deaths Per 1000
(1976)	f1970-75j	11970-751	(1970-75)
		and the second of the second of the second	الأران والمحاربين والمحافظ والمستور الأراديا

Population Births per 1000 Deaths per 1000 (moreth rain (1470-751 11970-751 (1976) (-1970-75)

OAFGHANISTAN

٠					
Ħ	19,796,000	2.5%	-	49,2	23,8

No official policy but MOH promotes integration of to into MCH. EpA, founded in 1968 IPPF member 1971, is establishing a nationwide network of 34 fp clinics integrated into government MCH clinics by end of 1976. FPA also concentrates on 18th and training. 26 FPA clinics recruited 13.456 new acceptors in 1975 - majority orals, IPPF grant to FPA. Assistance from LINFPA, UNESCO, UNICEF, WHO and USAID.

~*BAHRAIN

Ì			
	259.000	3.1% (1970 - 74)	
		L	

No official policy but some interest in government ejecles to incorporate ip into health services. FPA founded in 1975, aims to promote Ip as a MCH measure and as a human right. Contraceptives available commercially. Abortion permitted only to save life of mother. . .

•BANGLADESH

. 4			$\sim\sim\sim$	
	# # 530 000	200 / 1000	. 46.0	30 ,
_	75.529,000	3.0% (1975)	49.5	40.
			1	
	-			

Government programme reorganized in 1973, aims to develop integrated health services including sp. Target to reduce growth rate to 2.8% by 1978. Services through over 1,030 MCHIIn clinics. Orals and condoms most popular. Paramedics allowed to prescribe orals and insert IUDs, Intensive I&E programme, FPA, founded in 1952, IPPF member 1975, was reorganized after independence. Now concentrates on 1&P, rural integrated projects and coordinating voluntary efforts, 22,500 new acceptors in 1978 through one FPA clinic and 31 supply centres located in factories, agricultural co-operative societies, other voluntary agencies and rural demonstration project areas. CBD project for orals and condons. IPPF grant to FPA. Assistance from UNFPA, ILO. UNICEF, WHO. UNESCO, IBRD. FAO; WFP, ADAA, UKODM, CIDA, DANIDA, Federal Republic of Germany, Finland, NORAD, SIDA, USAID, Asia Foundation, AVS, FPIA, Ford Foundation, JASSW, OXFAM. Pathfinder Fund and World Education.

BHUTAN

		بالمستحب سسم	-
1 203 000	2.30	43.6	20.6
1,202,000	med 5	70.0	-0,6
	·	Laurence and the second	

No organized fo activities

BRUNEI

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		a realization and a discount of the language	ļ
	149,000	2.5% (1970-74) 34.7 (1973) \$8 (1973)	Ł
3			,
30			ļ

No official policy and no organized spactivities. Advice available Privately.

BURMA					3.7	
				 	-	-
31,992,000	. `		3.4%	39.5		15,8
	1 .	1	. *	 4		

Ropulation Commission set up in 1976 to formulate population policy. Interest in 19 as part of MCH in official and medical citcles. FPA founded in 1960, has higherally ceased activities since 1963. Abortion widespread and permitted only to sale life of mother. Sterilization available for medical indications only. Orals and IUDs available in some hospitals.

CAMBODIA (Khmer Republic)

	Andrew Market		Marie San	Same to be day or other	بالمعادات فيسترق والمصارمة رقي والمت	· · · · · · · · · · · · · · · · · · ·	فللبطاع للدريس يعيناه فسيخز والبعابات والاعراب بمراد	-
ľ	6 340 000		3 000	1	4 14		10.0	
1	8,349,000	1	2.36/3	- 1	40	. 1	13:0	
ľ				i	400	}		

No information available an present to situation, Government had integrated a small fo programme with MCII services in 1972, FPA was founded in 1971, and became IPPF member in 1973. French 1920 anti-contraceptive law still existed and abortion was legal only to save life of mother. IPPF gave grant to FPA; LEAFPA, IGCC and Thailand provided assistance.

CHINA, PEOPLE'S REPUBLIC OF

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852,565,000	1 7/2	i. 3α	(A) (.
1 75 5 565 1810		26.9	1 157 4
1 000000	1 11 75	*10.	, T. Y. S.
	• .		

Government programme since 1957, target to reduce growth rate to 1% by 2000. Fp integrated into health services and available through local units, rural health stations and hare-foot doctors. All methods of sp. including late marriage. Contraceptives, sterilization and abortion free-of-charge. Orals widely available ance 1967 and 'paper pill' more recently. Paramedics distribute orals and insert IUDs, Massive to education campaign, particularly in tural areas. Abortion legalized in 1957,

OCYPRUS

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e		1 40.		17 6 213 22	, . 1	0.1/20751
÷,	638,900/1975)	'ڇَنِيا		: 16,9 (1975	/ .	9.1 (1975)
			-0 1			

No official policy but government is favourable towards FPA, founded in 1971, IPPFmember in 1973. FPA runs 2 clinics but its main activities are in 1&E and sex education. FPA provides I&E in MOA rural centres. Contraceptives available from private doctors and pharmacies. Abortion legal since 1974 of medical and socio-economic grounds. IPPF grant to FPA. Assistance from UNFPA and USAID.

39

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५४-६१ अंगुरेय नेपूर्व काली २६ जारा ५	DIA NUMBER OF SEC	books and compared and a second	are la agra	un recorde a roces, escurero a religio e 🕫 .	contains area gray a ser-	on preparational comm	
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119761		11170-331	- 1	(1979-25)	5.41	970-751	-
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	11.15			20 10 1		,	1 .

Population Growth rate Births per 1000 Deaths per 1000 (1976) (1970-75) (1970-75) (1970-75)

MONG KONG

						and sometimes	guarding trains		
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	379.00			1 1 2	-	1 130 元 4 m 1674			

Government programms amounted in 1979 to integrate to into MCII services. FPA chairs in government dealth centure and hospitals taken over by the povernment, Low their enals available without prescription. FPA, hounded in 1946, HPF member 1933, continues to make a product in areas not covered by the government, 14,285 new acceptance if 1794 clinics in areas not covered by the government, 14,285 new acceptance if 1794 has a compathenaire last and training programme and started a CBO project in 1974. Aboution legal on medical grounds. HPF grant to FPA. Amistance from Ana Foundation, IASSW and Population Council.

#INDIA

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	376.0	A 3 . 17 W.	0.197	432	4.9	;		3.7	- 148 世 美。	1	ř	Ŀ	19	
		4			,			42.0		N	P.	ä	7.7	

Government programme since 1931, ranger revised in 1974, to reduce high rate to 30/1000 by 1979. Services at over 50 Min government, and 5 ANA other organization clinics to 17.6 million reciples by and of 1975. The His of all anaples in propoductive are group, happened um sterilizacion and several state governmenta introducing legislation to encourage sterilizathin after three children, including use of incentives and dislocentives. All methods available although or all on medical subsectionly. Filed programmes for providing orals through 1,476 urban 2016 69) primary health century live of charge. Partunwide CND project for condums and an extensive framme programme. FPA, founded 1949, IPPF member 1952 provided services through 14 lived and include clinics to 98,994 new acceptors in 1975 – sterilization and condums must popular. FPA also concentrates on training, population education and innovative projects and reas notal integrated projects. Abortion law liberalized in 1971, effective 1972, offices abortion on social and medical grounds. Legal age of marriage being leised to 21 for men and 18 for women. Population education progestly available in wheels, adult centurs and through less formal channels. IPPF grout to FPA. Assistance from UNIPA. UNICEF, UNESCO, ILO, IDRO, WHO, IDRC, DANIDA, SIDA, NORAD, UKODM, USAID, WAY: Luckstan World Rebef, OXFAM, FPIA, CWS, World Neighborn, Population Council, Ford Foundation, Pathfinder Fund, 1855W and World Education.

øINDONESIA

		CONTRACTOR SALES PROPERTY PROPERTY AND ADDRESS AND ADD
	30.00	

Government programme since 1968; target 8 million new acceptors in Java and Bab in 1975. To and 1 million new acceptors in Outer Edands. Services at 2.794 clinics in Java and Bab with over 2 million active users in 1975; 65% orals. Fp. also available at Armed Forces clinics and floopitals. Extensive use of fieldworkers and 115 mobile units for I&E. FPA. founded in 1957, IPPF member 1967, was responsible for training of non-medical personnel for national programme through 18 training centres until 1973. Training now joint responsibility with government and community education, youth programmes and clinical services in Outer Islands and 28 in Java and Bab. Tax disincentives for large families. Abortion legal only to save life of mother. High custom duties on contraceptives abolished if imported through MOH. Population education to be included in all schools from January 1977, IPPF grant to FPA. Assistance from UNFPA, UNICEF, WHO, IBRD, UNESCO, FAO/WFP, JOICFP, NORAD, USAID, CWS, FFIA, APHA, AVS, Asia Foundation, Ford Foundation, IDRC, IASSW, OXFAM, Pathfinder Fund, Population Council, Rockefeller Foundation, World-Education, World Neighburs and World University Service, Government grant to IPPF.

WIRAN

				promotometraners			
	3937.000						

Government programmy since 1967; target to reduce growth rate to 1.5% by 1995. Services, through over 2.600 clinics and 50 mobile units, FPA founded in 1958, IPPF member 1971; 50.649 new acceptors at 31 FPA urban and 165 rural clinics in 1975, orbits and condoms most popular. Emphasis on education, greater involvement of youth, and Ip services in community development context and in cural areas. Abortion legal on social and medical grounds since 1973. Orals available without prescription and qualified midwives insert IUD's. Sex education being introduced in school curricula. IPPF grant to FPA. Assistance from UNFPA, UNESCO, ILO, UNICEF, WHO, IBRD and Population Council.

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	- 6	and the second s		4,0 2,000	- 1	******		4 5 1 10	经基础转换 化双氯甲基甲基苯基

Government policy promotalist but support to FPA, founded in 1971, IPPF member the same year. FPA has descloped a maternity-centred fp programme and provides services through 6 clinics based in major maternity hospitals and MCH centres with 5,716 new acceptors in 1975—over half orals. It also has an I&E programme. Abortion legal on medical and juridicial grounds and if performed within the health service. Orals off prescription and non-physicians allowed to insert IUDs since 1975, IPPF grant to FPA. Assistance from UNFPA mainly for demographic projects.

1

	The second of		12 / 10	1.0	 				Phys. 1		and the state of the state of	
		oulot			Growtz		Births n			Deaths per		
		1976			11970-							
								1-731		/1970:		

Population Births per 1000 Deaths per 1000 Growth rate 119761 (1970-75) (1970-75) (1970 - 75)

OISRAEL

3.517.000

Government attitude promatalist but recently health services have been authorized to develop by services within MCH. Fp available at most out patient maternity clinics and orals available without prescription. FPA, founded in 1966, IPPF member 1976, undertakes I&E and training activities. Hospitals of the Sick Fund of the General Federation of Labour offer ip. New bill under discussion to liberalize abortion. Family-life education has officially been accepted by MOE.

JAPAN

111.933,000/19751 17.2 (1975) 6.3 (1975)

Government programme since 1952. An All-party Parliamentary Population Group set up in April 1974 to study population and related issues. Fp services at about 600 MCH and 830 public health centies. Most IUDs and orals illegal although some IUDs legalized in July 1974. Orals sold at chemists as menstrual cycle regulators. Condoms most popular and available through fieldworkers. FPA, founded in 1954, IPPF member the same year, concentrates mainly on motivational work, sex education and training. Abortion is legal, easily available and inexpensive. Government gives international assistance and grants to IPPF

OJORDAN

2,779,000 1.3% 47.6

No official policy but government supports FPA, founded in 1963, IPPF member 1964, FPA has 28 clinics and rons 4 clinics jointly with UNRWA, 4.673 new and 12,429 continuing acceptors in 1975. I&E efforts directed to special target groups eg. youth clubs, teachers, women's unions and voluntary organizations. Abortion illegal, but in practice accepted on medical and juridicial grounds. IPPF grant to FPA. Assistance from UNFPA, UNESCO and FPIA.

KOREA, DEMOCRATIC PEOPLE'S REPUBLIC OF

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1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			

No information on to activities.

•KOREA, REPUBLIC OF

34.688.000 (1975) 1.7% [1975] 24.0/19751 7.0 (1975)

Government programme since 1962; target to reduce growth rate to 1.3% by 1981 and to recruit 3.1 million acceptors between 1977-81. Fourth 5-year development plan 1977-81 gives increased priority to fp. Inter-ministerial population policy committee established in 1976, 38% of fertile married progration practise contraception and 2.35 million births averted in 1962–73. Services through 198 health centres and 1,802 government designated doctors to 502,883 new acceptors (excluding condom users) in 1975 - majority IUD. FPA, founded in 1961, IPPF member the same year, has responsibility for I&E companyet in the national programme and operates a network of 29,984 Mothers' Clubs through which orals and condoms are distributed. FPA provides services in 75 government hospitals and started CBD project in 1975. About 30,000 new acceptors recruited in 1975 at 14 FPA demonstration clinics in low income areas. Korean Institute of Family Planning provides training for the national programme. Orals available commercially and trained paramedies prescribe orals and insert IUDs. Abortion legal on medical, engenic and juridicial grounds. IPPF grant to FPA. Assistance from UNFPA. WHO, UNESCO, UNICEF, SIDA. USAID, FAO/WFP, Asia Foundation, AVS, FPIA, IASSW, OXFAM, Population Council and Rockefeller Foundation, Government grant to IPPF,

KHWAIT

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994 837 / 10751	47.1	i		C 3
1 354957 (1335)	47.1	١.	1.0	ುವ -

No official policy and no organized fp activities, but individual doctors give advice and supplies are available commercially. Population growth through immigration is high. Abortion permitted only to save life of mothel.

	THE PARTY	- 1 di				100	1.19		*-				ar on Ge 10s		4
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	10.00	7						1000		1	1	. 10		30, 20, 20	

Government banned use of contraceptives in order to increase population in 1976. In 1972 policy to reduce population growth was announced and a Commission for Promotion of Family Well-Being was set up. MOH was in the process of integrating ip in MCH. FPA, founded in 1969, became IPPF member in 1973, provided services and I&E; dissolved in 1975 Red Cross also played an active role. French 1920 anti-contraceptive law was in force and abortion, although illegal, was widespread, IPPF gave grants to FPA and UNFPA, WHO USAID and Asia Foundation also gave assistance.

20

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Population	Growth rate	Births per 1000	Deaths per 1000
사이지 승규를 하다 집에 하는데 다	17 794		Dentity her 1000
719761	(1970-75)	(1970-75)	11970-751
14/14/	14770, 177	1310-131	[(19/0-/3) ;]
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Maria Callera Principal Carlos Services	ALCOHOL STATE OF THE STATE OF T	20.00	

OLEBANON

ĭ	LEBANON			Para da Ar	
	2,959,000	3.0%	39.8	1 29	.9

No official policy or programme, but FPA, founded in 1969, IPPF member 1970, allowed to run clinics in government health centres and in Social Affairs Institutes, 3,258 new acceptors in 1975 at 18 FPA clinics—orals and condoms most popular. 5 clinics had to be closed down in 1976. FPA assists other organizations and government departments eg. Army and Ministry of Labour and Social Welfare, in providing fp services in their welfare clinics and started CBD project in Southern Lebanon in 1975. The Penal Code still prohibits contraception and abortion is permitted only to save life of mother in special cases. IRPF grant to FPA. Assistance from UNFPA, UNESCO, CWS and Pathfinder Fund.

MALDIVE ISLANDS

		,69				197			2719					
													972	

Government interest in integrating fp with MCH services

MALAYSIA

ġ.	State State State of the state	7		7	
	12 454 000		1 60 /10 161	10	+ 0 0 0 0 O
	12.434,000		2.6% (1975)	.38	J = 1 - 9.9 - 1
11	March 1997 St.			1	

- WEST MALAYSIA Government programme since 1966, target to reduce growth rate to 27% by 1985. 77 Government clinics and 440 mobile units, plantations, Federal Land Development Authority scheines and private rectitioners provide services. Fp to be integrated in MCH services by end of 1976. In rural areas services also provided by government nurses, auxiliaries and midwives. 1,011 auxiliaries trained in 1975. Over half a million women 43% of eligible couples practise fp. Orals main method used. FPA, founded in 1958, IPPF member 1961, provided services through 236 plantations, mobile and static clinics to 13,468 new acceptors in 1975. FPA runs family life education and youth programmes. Abortion legal on medical, eugenic and juridicial grounds: Population education being introduced in school curricula. IPPF grant to FPA. Assistance from UNFPA, UNICEF, UNESCO, WHO, IBRD, IDRC, SIDA, USAID, Asia Foundation, AVS and World Education. IPPF East & South east Asia & Oceania Regional Office in Kuala Lumpur.
- SABAH No official policy or programme but government support to FPA, founded in 1967. FPA runs 3 main and 51 sub-clinics with 11,728 new acceptors in 1975, majority orals, A trial CBD project in rural areas started in 1975. FPA also runs L&E and training programmes. IPPF grant to FPA.
- OSARAWAK Government integrating fp in MCH services. FPA founded in 1962, working closely with government. 9,284 new and 19,516 continuing acceptors at FPA's 9 main and 108 sub-clinics in 1975 majority orals. FPA responsible for training its own, government and other agencies' paramedical personnel and runs 1&E programme. IPPF grant to FPA.

Population	Growth rate	Births per 1000	Deaths per 1000
(1976)	(1970–75)	(1970–75)	(1970-75)
MONGOLIA			
1.489.000	2.9%	38.8	0.2

No information on fp activities.

NEPAL

10.0
20.3
-

Government programme since 1965; target to reduce growth rate to 1% by 1985. Basic fp and MCH services at 265 government centres with over 1 million acceptors in 1975—condoms and orals most popular and sterilization gaining in popularity. FPA, founded in 1958, IPPR member in 1960, supports national programme and participates in joint projects. 12,700 new acceptors at 6 FPA clinics and mobile camps in 1975. I&E activities directed at local leaders, workers and youth groups. Marriage age raised to 21 for men and 18 for women. Orals available at designated chemists without prescription. Abortion permitted only on medical grounds. IPPF grant to FPA. Assistance from UNFPA, UNESCO, UNICEF, USAID, FPIA, AVS, World Neighbors and World University Service.

OMAN

O I I K I K I			No. 2 (1972)		
791,000	- 124 - 124	3.3%	1970 74)	42.9	20.3

No organized sp, activities; some services available in private hospitals. Abortion permitted only to save life of mother.

PAKISTAN

ĸ.										Sec. 1541, w. 1987.	
d	No. 25 - 25 M	A COLUMN			1 - 1 - 6		1				The same of the sa
•	72,370	ነ ለለለ -	1.0		-2 10% ·	D-12		44 C	18	100	ren Land
ê	14,011	1,000	5 1 3 6 2		3.1%	1.0	V. C. 1	44.5/197))	150	(1976)
	LE 0 1,30	188	300 年數月	. A	350 1 100	The State of the State of					1-12-6-57
										and the state of t	THE RESERVE OF THE PARTY OF THE

Government programme since 1960; redesigned in 1976 with more emphasis on integrating fp with rural and agricultural programmes and on sterilization. Target to reduce growth rate to 2.6% by 1981. About 700 fp clinics and a CBD project with 40,000 distributors in operation. FPA founded 1953, IPPE member 1954, recruited 28,300 new acceptors at 64 centres and started a CBD project in 1975. FPA experiments in innovative education and communication methods, and gives priority to services to rural areas, workers, slum dwellers, young people and women. Trained paramedics allowed to insert IUDs and orals available without prescription. Abortion legal on medical grounds only. IPPF grant to FPA. Assistance from UNFPA, UNICEF, UNESCO, WHO, ADAA, Germany, NORAD, UKODM, USAID, AVS, FPIA, Ford Foundation, IASSW and Population Council. Government grant to IPPF.

45

Population Growth rate (1976) (1970-75)	Births per 1000	Deaths per 1000
(1976) (1970–75)	(1970–75)	(1970-73)

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м	41	- 4 T D	31,045/	ישרתוו	1 1 1	2.6%	1.3	- 77	4 (1975)			1111 E		
	- 1	41.	11 11471	10/1	1 1	100	1	. 11	4 ((9/1)			11117		
		T	J I . V T J (4710	, ,	2,070	. 1		て. (4 2 / 3 /	100			2.5	
	:07	Service Control				16 × 16 × 1								

Government programme since 1970; target to reduce growth rate to 2.4% by 1977. Fo Megral part of social development and about 40 government and private agencies participate in the programme. Services at over 2,700 clinics with 716,000 new acceptors in 1975 - over half orals. Sale of couldoms and orals through commercial channels since 1975. Sterilization gaining popularity. Special projects to reach rural areas. 2 FPAs, founded in 1961 and 1965, merged in 1969; IPPF member since 1965; 63,975 new acceptors through 335 FPA clinics in 1975. FPA concentrates on integrated projects, I&E and training activities directed at rural areas and youth. Anti-contraceptive law liberalized in 1969 and restrictions on pro-natalist social measures introduced in 1973. Trained nurses and midwives allowed to dispense and administer all acceptable contraceptives. A five-year government programme to introduce population education in primary and secondary education. IPPF grant to FPA. Assistance from UNFPA, UNICEF, WHO, UNESCO, IBRD, JICA, IDRC, USAID, APHA, Asia Foundation, AVS, FPIA, CWS, Ford Foundation, IASSW, JOICFP, OXFAM, Pathfinder Fund, Population Council, PSI, Rockefeller Foundation, World Education and World Neighbors.

OATAR

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No organized to activities. Abortion permitted only to save life of mother

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ě.	0.000.000	3.00	40.0	70.5
	I 9.2383RIU	1.9%	49.3	40.2
			37.0	 Problem 1 Annual Problem (1997)
3	5 - 1 - 2 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3			Land to the second

Government banness contraceptives in April 175; smuggling of contraceptive pills or devices punishable by six—onth imprisonment Unit then, some contraceptives were available locally, and there was some interest in healt: aspects of fp.

SIKKIM

	THE RESERVE THE PARTY OF THE PA			
226,000	2:0%			

No organized fp activities

Growth fate Births per 1000 Population. Deaths per 1000 11970-151 (1970-75) (1976) 11970-751

INGAPORE	$\sim\sim\sim$	\sim	
2,284,000			5.2 (1975)

Government programme since 1965; target to reduce birth rate to 18/1000 by 1975 achieved. Long term target to achieve zero Population growth by maintaining replacement level fertility is, not reproduction fate of 1.0 or the two child family average. Government provides all services - increasing emphasis on sterilization, reaching hardcore groups and reducing desired family size to two irrespective of sex, 68% of married women 15-44 years currently practise fp. Intensive I&E programme including schools and places of work. 16,692 new acceptors at 45 MCH/Ig clinics in 1975 words most popular. Hospitals also provide services and an effective post partum and post abortal programme. FPA, founded in 1949, IPPF member in 1952, concentrates on 18E aimed at Youth, trade unions and other professional groups. Abortion and sterilization legalized in 1969 and further liberalized in 1974 and 1975 respectively. Abortion now available on request. Anti-natalist legislation eg., no maternity benefits beyond third child, low priority for government housing, higher maternity fees, no tax deductions from fourth child onwards introduced in 1973 and reinforced since. IPPF grant to FPA. Assistance from UNFPA, UNICEF, UNESCO, UKOPA IDRC, Asia Foundation, IASSIV, Pathlinder Fund and Population Council.

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Government tragrammer 1965 integrated into general health services. Revised larget to -duce birth rate to 23 00 by 1980. Services available at 1.174 clinics in hospitals, MCH centres and polyclimics and through domiciliary services by public health midwives and nurses, 579 anismatal climes equipped to Provide IUD insertions and other ip services: Orals and concess distributed by public health midwives at subsidized prices. FPA, founded in 1953, IPPF mater in 1954, runs 8 clinics with extensive use of probile units, 5,300 new acceptors 13-20. — tomy in 1975. FPA Reli programme directed to rural areas and youth. Special project — ar 42 industrial firms. IPPF CBD project for condoms started in 1973. island wide or dution in 1976. Aborton legal on medical grounds only. IPPF grant to FPA Assistant UNFPA WHO, ILO UNESCO, UNICEF, SIDA USAID, AVS. IASSW. FPIA, Patternder Fund, Population Council, World Neighbors and PSI. Government grant to IPPF. IPPF Indian Ocean Regional Office in Colombo.

OSYRIA 7,355,000 (1975) 3.0% 45.4

MOH/sp division set up in 1974 to incorporate sp into health structure. FPA sounded in 1974, IPPF member 1975, works closely with government. Fix runs 3 clinics and I&E and training programmes. Publicity for contraceptives illegal; abortion permitted to save life of mother only. IPPF grant to FPA. Assistance from UNFPA.

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	Population	Growthrase	Births per 1000	Deaths per 1000
\$ \$	(1976)	(1970-75)	(1970-75)	(1970-75)
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Government programme since 1964, policy announced in 1968. Target to reduce growth rate by 1.8% by 1978 achieved in 1975. Services available through government clinics, health centres and private doctors and emphasis on fieldworkers operating from health stations throughout the island, 60% of married women aged 15-44 practising fp by the end of 1975 with nearly 300,000 new acceptors in 1975. Sterilization emphasized; monthly 2,800 acceptors in 1975, 2 FPAs, founded in 1954 and 1963. The first FPA conceptrates on Taipei and other large cities. The other FPA works in co-operation with provincial health departments, and provides support to government I&E programme. Abortion easily available, although permitted for medical reasons only. Abortion law reform under consideration. Population and speducation integrals into school curricula, limnort dusies on contraceptives for government use removed and for commercial use lowered. Assistance from UNICEF, AVS, Population Council, Pathfinder target, FPIA, OXFAM, Ford Formaction and Lutheran World Relief.

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Government programme since 1976, far set to reduce growth rate 12. 11% by 1981. Fp integrated into existing health new (1.553,205 new acceptors by government, FPA and other agencies in 1975; majority — Large scale soles of contraceptives over the counter. Health centres instructed to district or sis free-of-charge in 1976. FFA, founded in 1970, IPPF member 1971, concentrates on the with emphasis on youth, workers and sp within tural and community development schemes. CBD in raral areas through housewives and extension workers. IPPF supported CBD project since 1973. Trained auxiliary midwives permitted to prescribe orals and to insert IUDs. Abortion legal to safeguard woman's health and for juridicial reasons. Fp being integrated into schools and adult literacy programmes. IPPF stant to FPA. Assistance from UNFPA, WHO, UNICEF, UNESCO, IDRC, UKODM. IICA, USAID, APPIA, Asia Foundation, AVS, CWS, FPIA, Ford Foundation, IASSW, IOICFP, OXFAM, Pathlinder Fund, Population Council, Rockefeller Foundation, World Education and World University Service, Government grant to IPPF.

*TURKEY

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Government programme since 1965, (2,744 acceptors in 1975 at 577 government clinics in hospitals and MCH centres. A bill to integrate fp with MCH under consideration and two pilot MCH/fp projects. FPA, Tounded in 1963, IPPF member 1965, prevides services through 10 clinics with 21,835 acceptors in 1975 and runs L&E programme. Abortion legal on medical and eugenic grounds. IPPF grant to FPA, Assistance from UNFPA, WHO, UNICEF, IDRC, USAID, AVS, FPIA, IASSW, Ford Foundation and Population Council.

The state of the s			
Population	Growth rate	Births per 1000	Deaths per 1000
			 1. 1. 4
(1976)	(1970-75)	11970-751	[1970-75]

OUNION OF SOVIET SOCIALIST REPUBLICS

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No official policy but advice and services available within health service, at local health centres and obstetrics and gynaecology departments of hospitals. Abortion available on request up to 12 weeks and widely practised since 1956.

UNITED ARAB EMIRATES

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No organized sp activities. Abortion permitted only to save life of mother.

OVIETNAM. SOCIALIST REPUBLIC OF

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2.1%	On C	'n
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Government Programme in the north singe 1971; Ip services available since 1963. Target to reduce growth rate to 1.7% by 1980. IUD mosapopular. Abortion legal on socio-medical grounds. Before 1975, Ip services provided in the south by Government and IPPF member FPA. Government now plans to launch ip programme in the south including pre-natal and post-partum: services to improve MCH and to reduce growth rate by 2.5% per year. Assistance from SIDA

AYEMEN, ARAB REPUBLIC OF

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Α.	4	Mark and		1 . P	4 666		. 1			. 37
	್ರ	.237,893	ABB/3	)	2,9%		40	) <i>f</i> r	1 20	6
1									i - 1 (5) ***	2.56.5

No official policy but Government has shown some interest in health aspects of fp. Pilot project for integrated MCII/fp in Sana with UNFPA assistance. FpA, founded in 1974. Individual physicians give fp advice.

YEMEN, PEOPLE'S DEMOCRATIC REPUBLIC OF

										-		
	710,				100							

No official policy or programme but contraceptives available locally. A materially centred in project supported by WHO and UNFPA started in 1975. About an permitted to save life of mother only.

# Europe

Region	Population is 1976	Population in 2000	Papulation Growth Rate (1970-75)	Births = 1000 (197-75)	Deaths per 1000 (1970-75)	Population Under 15 (1970-75)	Life Expectancy (1970-75)
Europe	475,863,000	539,812,000	0.6%		10,4	23,9%	712

The degree of government involvement in family planning in Europe shows considerable variation although contraceptive services are generally available in most countries. In many European countries family planning has been integrated with public health services but despite the long history of voluntary family planning associations, government participation is relatively recent. In Britain for example, where the first family planning pioneers were active as early as the 1920s, the government assumed responsibility for providing contraceptive services in 1974. In 1975 contraceptive advice and services became part of social security in France, and in Portugal the government started providing services through public health centres. Under a new law passed in July 1975, municipal family planning centres will be selven in Italy with government support. There are still some countries however — Greece, Malta and Spain — where laws and regulations restrict the publicity or sale of contraceptives.

The pioneering role of the voluntary associations is well recognized by most governments. With the increased government participation in family playing, associations now are working as partners with the government programmes with specific responsibilities such as information and education programmes, training and sometimes operating model clinical programmes at government request.

Europe has the lowest sepulation growth and birth rates in the world. The steady decline in fertility and the low levels of increase in population have started to cause concern among

many gosements especially in Eastern Europe. All ough contraceptives are provided in these concres as a basic health service, and a substitute for abortion and in recognition of women's chis; some governments have taken steps to encourage higher birth fatos by introduces increased social welfare benefits such as child allowances, maternity benefits; or housing llowances. Liberal abortion laws have been restricted in Bulgaria, Czechoslovakia, Rungary and Romania to women in older age groups and with more than 3 or 4 children. In contrast, western European countries are moving towards making abortion more easily and widely smaller. There are attempts too, to liberalize the laws restricting voluntary sterilization countries, especially in Scandinavia, it is now available on request.

Sex education is another area where a great deal of advancement has been achieved in Europe. In many countries sex education is included in the primary and secondary school curriculatand there is a trend to include family planning education in sex education in order to meet the needs of the younger generation. Family planning associations are very active in this area and work closely with the governments.

A major part of the international assistance to family planning programmes comes from European countries, particularly from Scandinavia, through both bilateral and mutilateral channels.

52



ERÍC

Population Births per 1000 Growth rate Deaths per 1000 (1970-75) (1975)(1975) 11975

Population Births per 1000 Growth rote Deaths per 1000 (1975) [1970.75] 119751 [1975]

albania

	48						3331			111	
										-	

No organized ip activities and attitude to contraception unlavourable although imported condoms available in phormacies. Abortion and sterilization banned, However, birth rate ipulcates some form of contraception is practised.

## • AUSTRIA

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	ببنخون				at water the				· Truescan						

Ministry of the set up in 1971, services at over 120 clinics — one in each fural district and fo included in social welfare information offices. FPA, founded 1970, IPPF member 1971. closely co-operates with government in I&E and runs 50 clinics at majornal and local health facilities, majority financed by government. FPA organizes training and sex education courses and meetings for health personnel, trade unionists and vocational schools. Ban on JUD lifted in 1973 and first trimester abortion on request levalized in January 1975, IPPF erant to FPA.

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No official policy but confraceptives generally available and consultation fees reimbursed by social security, 25% of couples estimated to use effective confracepries, Federated FPA. counded in 1963, IPPF member 1967; regionalized activities in 1975 to allow regions to pursue independent policies. Undertakes sex education activities particularly among youth and training courses for teachers and other groups. FPA is to bying government to provide services and I&E. Fp publicity legalized in 1973 and Ministry of Public Health information compaign on contraception since 1974. Abortion illegal, IPPF Brant to FPA, Government grant to IPPF

## BULGARIA

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		2															
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Official policy and social measures to increase birth rate. Engovice and services through 2,576 women's and MCH centres - varying from small rural preventive health centres to university hospitals. Most widely used method withdrawal (75%), 3% use grals and 5% LUDs. Family Development Council became IPPF member in 1975 Abortion restricted in 1973 to women aged 40 or more and/or with 2 or more children, except on medical or cugenic grounds.

## •CZECHOSLAVAKIA

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14.862,000/19761	Ned 1	111.2		4 6 6 6 6 6
19.804,000 [17/0]	V.07	19.5		
		-		

Official policy and social measures to increase birth rate although government favours contraception as substitute to abortion and in recognition of women's rights. In advice and services at hospitals and health clinics. All methods available, Abortion testificies in 1973 to women over 40 or women with 3 or more children; Some social indications, eg. housing or funncial difficulties are also grounds for abortion.

## MINUADE

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Government services through health network and general practitioners. FPA, founded in 1955, IPPF member the same year acts as co-ordinating body between government and other agencies and concentrates on l&E, especially sex education. Also runs 2 clinics in Copenhagen: Epadvice compulsory after delivery and abortion. First trimester abortion legal on request since 1973 and abortions doubled between 1972-74. Sterilization legal on request for those aged 24 or more. Sex education compulsory from age 7 since 1971. Government gives international assistance and grants to IPPF.

#### FINLAND

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Government services through public health network free-of charge. FPA, founded in 1941. IPPF member 1959, is active in population and Ip policy research and family guidance. IPA. a federation of 25 organizations, runs 4 clinics and conducts I&E. Fo advice compulsory after abortion which is available on social grounds. Sterdization legal, Maternity benefits extended and child allowances increased in 1974. Sex education in schools: Government gives international assistance and grants to IPPF.

#### **FRANCE**

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Government provides in advice and services since December 1974; cost of contraceptives reimbursed by social security. FPA, founded in 1956, IPPF member 1959, runs over 350 advice centres, a few offer ip services. FPA has an active information, sex education and counselling biogramme and provides Italians, Abortion legal on request up to ten weeks of programcy and on medical grounds at later stages since January 1975. Measures introduced May 1976 to increase falling birth rate including higher family allowances, longer maternity. leave and easier housing loans for growing families

53

general en antario agus 1 an 1 a g	ومواه العمواوي الكرام أيارا مراجوا	and grant the same of constraints and on the same and a second	and the state of the state of the state of the state of
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#### **♥GERMAN DEMOCRATIC REPUBLIC**

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Conserminent services through health personsk free all-charge, 40% of women in fertile ages ess organic NUDs. FPA, framery in 1964, 1994 proper 1967, non-about 200 marriage and sexual commelling contrest mustly located at local health facilities, and supported by govern-15581. FPA provides marriage counterling for young people and mathration to have children. especially we could not found. Abortion logal and available tree-elepance during the first 12 rateks of pregnetary stage 1972, 59 abortions per 1981 for burils in 1973. Steilliestoon of restricts permitted it are other themsels reversable. Sex inducation econocisions in princips, and granday uhida.

#### OG RMAN FEDERAL REPUBLIC

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So official policy but government support to a model to and outgrouncy controlling notices 22 of \$3 moralet climate purply FPA, founded in 1982, IPPF member same year FPA also and understand it took professional remember on contracting and the expanding its work in real area and among youth groups. Contracepoints widely included: 33% of women 1894 15. All use ords, in 1975 hav passed for provision of analy under rocal security schape. Law blooding in 143 has allow during on with pound in this tringer. Comment pires internalized explants and group in 1919.

#### GREECE

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## MUNGARY

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Generalized toping to proving and to whate and terrines through health service although istificad policy is to grantific higher both rate. Soonly welfare accounts, ep. child allowances and maximily binedly, increased in 1974. All continceptives acadable. Epiadrice before, magnizer compulsors. Homogen Scheptific Society for Family Welfare became IPH member on 1975. Absorbed legal on black grounds duce 1986, restricted to health residus or to we ment are 140 of early 3 or ember children in 1974. Abortion puts 9.3 per 1000 in 1975, Sex policyme at all school books succe 1974;

#### OICELAND

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Services available at hospitals and doctors legally required to give advice. Orals and IUDs most popular. Abertion legal on socie diedical stounds,

## AIRISH REPUBLIC

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Official spepilicy restrictive. FPA, founded in 1969, HPF member 1973, runs 4 clinics, All methods available, including vasections. 6.293 Dev. Patients at 2 FPA clinics in 1974; orals most popular and 20% use 100s. FPA organizes training courses for health personnel. Import of contraceptives legalized by Supreme Court in 1973 but their sale is still illegal. Abortion illegal, IPPF grant to FPA

#### OTTALY

Р	application in the contract of	Francisco de 1947 frança que 100 references en Version.	والماعلم والماراء والمعلم والماراء والمعلم والمتاركة	and the second of the second	ودويانا التحديد ويورون المدينة ويوادان الدواور وي	
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Concernment support to municipal faulth centres to be set up under new law passed in June 1975. Federated FPA, founded in 1968, JPPF member 1969, provides services through city and saburban courses with over 10,000 eligible in 1975. Their centres upened in southern Italy in 1975, FPA emphasizes I&E and sex education and trains health personnel. All methods readily available in urban areas. Anti-contraceptive laws repealed in 1971 and 1972, Abortion illegal except on serious incident grounds. Sex education courses sponsored by MOE, IPPF want in FPA.

#### OLUXEMBOURG

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	357,000	Mo Cit		- 11	. #		1	300

Government support to FPA, founded in 1963, IPPF member 1962, FPA runs one centre with 5,930 consultations in 1975; two new centres playing in response to public demand; FPA concentrates on sex education. Abortion legal on grace medical grounds only:

#### MALTA

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No official policy and no organized (P activities, Adventising of contraceptives prohibited but import for personal use permitted. Cana Movement, a RC group, provides family life education, including advice on all confraceptive methods and marital courses including fp education at its I centres. Abortion illust.

**ERIC** 

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#### NETHERLANDS

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Government services widely available. Royal Commission on Population established to formulate future population policy in 1972. Centraceptives requiring medical supervision free of charge to those covered by health insurance - 70% of population. FPA, founded in 1881, IPPF member 1952, runs 60 centres with 118,000 clients in 1975 providing all contraceptive methods, including sterilization, and 2 clinics providing abortion services. About 25% of women in fertile ages estimated to use contraceptives. FPA active in 1&E and organizes sex education courses for health personnel. Abortion legal on medical grounds only but several abortion clinics operate without interference and law expected to be liberalized shortly. Government gives international assistance and grants to IPPE.

#### ●NORWAY

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Government services through public health network. All methods available and 30% of women aged 15-44 use orals. FPA, founded in 1969, IPPF member 1970, concentrates on I&E and organizes training courses for teachers and pharmacists. Sterilization permitted, abortion legal on socio-medical indications since May 1975; Sex education compulsory. Government gives international assistance and grants to IPPF.

#### POLAND

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40	٦.	34 242 000 / 19761	1.	0 xc.	10.0	0.5	
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Government services through over 3,000 health centres; 70% of cost of contraceptives reunbursed by social insurance scheme. FPA, founded in 1957, IPPF member 1959, runs 13 clinics - 75,559 clients at two clinics in 1975, orals most popular. FPA also runs Premarital and Family Guidance Centre in Warsaw, concentrates on I&E, especially sex education, conducts research and, in co-operation with MOH, organizes training courses for health personnel. First trimester abortion legal on socio-medical grounds. Family life education included in secondary school curricula in 1973.

## PORTUGAL.

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Provision of information and legal and technical structures for fp included in Constitution. Government services through health network started in 1975. Services available at 70 MCH clinics free of charge, FPA, founded in 1967, IPPF member 1971, organizes training courses for health personnel at MOH request and conducts I&E work, MOE introduced sex education in primary and secondary schools in 1975. Advertising of contraceptives and abortion illegal. IPPF grant to FPA.

فالمالية ميمانيناك يماك المقاليات المهود تها والمالية ميمانينا والمالية	Markette region region and an artistic and ar	and a give of mathematic Witness are reparational to constitution of	المتعارضة والمتعارضة والمتعارضة والمتعارضة والمتعارض والمتعارضة والمتعارضة	
Population	Growth rate	Births per 1000	Deaths per 1000	
(1975)	(197075)	(1975)	(1975) -	

## **OROMANIA**

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	121,245,000	0.9%	20.3 (1974)	9.1 (1974)
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Government policy favours higher fertility but contraception promoted to prevent abortion, Advice and services available at some hospitals. Abortion restricted in 1966 to medical grounds and to women with 4 or more children.

#### SPAIN

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35,472,000	1.0% ,	 10.2		0.3	
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No official policy and no organized fp activities but services are available privately and to a limited extent at some hospitals. Spanish Society for Fertility works towards official recognition of fp and sex education sinco 1973. Advertising, distribution and practice of contraception prohibited but orals, IUDs and condoms available for purposes other than contraception. Abortion illegal except to save woman's life. IPPF provides assistance.

#### SWEDEN

-		Married Street, ownered Street, married Street, married Street, married Street, married Street, married Street,	
(), •.	0.6%	12.6	10,8

Government programme through public health network. Initial supply of contraceptives and IUDs are free of charge, orals subsidized. FPA, founded in 1934, IPPF member 1952, runs 2 clinics, organizes sex education courses for health personnel and trains midwives in JUD insertion. Contraceptive advice obligatory after delivery and abortion. 235,000 women use 1UDs and 200,000 orals. Abortion available on demand up to 12 weeks of pregnancy and after discussion with social worker between 13-18 weeks since January 1975; new law in January 1976 allows sterilization on request. Sex education compulsory. Government gives international assistance and grants to IPPF.

#### OSWITZERLAND

è		 -		 		-	4		نهر الإسلاميون	
	6,403,000		0.8%		12.4			8.8		

No official policy but sp advice and services provided at 23 centres run by women's and other organizations in various parts of the country. Some hospitals provide services and training. Sex education compulsory in some cantons.

Principles of the Principles o	وميها والراب والمالية والمالية والمعتبل والمنافقة والمنافقة والمناف والمالية والمنافقة والمنافقة والم	to a first the first that the first	Commence of the second of the	'
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	Population	Growsh rate	Births per 1000	Deaths per 1000
	(1975)	(1970-75)	(1975)	(1975)

## **QUNITED KINGDOM**

وموال مناسبات ويتمايته ومهاويته ومهومتها وتعوا ويواها	-	ويدور الورد ويورد والمراجع والم والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراج	فيعظلها الجيسان والميدال عوادب والهمادي والويا للايور المصامعا دي
55,962,000	4.0.3%	12.4	11.8

Government programme through national health service in 1974 and advice and services freeof charge since 1975. Services at 1,860 health authority clinics to 1.5 million users, through family doctors with 2.35 million registered users and through domiciliary services to 21,000 users in 1975/76. FPA, founded in 1930, IPPF member 1952, handed over more than 1,000 clinics and domiciliary services to government. FPA is active in I&E, in- and out-of-school sex education and training. An FPA development centre in each region to be set up to try out innovative ideas. Abortion legal on socio-midical grounds. Government gives international assistance and grants to IPPF, IPPF Central add Europe Regional Offices in London.

### • YUGOSLAVÍA

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	21,510,000/1976]		
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Ep recognized as human right in Constitution in 1974; government services at over 1,300 health units. All contraceptives provided free-of-charge. FPA, founded in 1966, IPPF member 1967, concentrates on sex education, by training teachers and producing materials, Abortion legal on socio-medical grounds and doctors obliged to give fp advice.

59

# Oceania

Region	Population in 1976	Population in 2000	Population Growth Rate (1970-75)	Births per 1000 (1970-75)	Deaths per 1000 (1970-75)	Population Under 15 (1975)	Life Expectancy (1970-75).	
Осеали	21,729,000	32,715,000	2.0%		A TO THE PROPERTY OF THE PROPE	31,5%	65,8	

Interest in family planning has grown considerably in Oceania during the last few years. Although the first voluntary family planning movement was started as early as 1926 in Australia and in 1935 in New Zealand, many private and public family planning programmes have been initiated only in the 1970s. Some governments have policies and objectives to slow down the population growth rate which is an impediment to their development efforts and others aim at making contraceptive services available to their people through the MCH

and public health networks. A substantial decline in the fertility rate has been experienced in Fift where a successful family planning programme has been in operation since 1962.

Governments of Australia and New Zealand are supporting family planning beth at Lome and abroad, by giving grants to national family planning agencies and terrorational arganizations to assist programmes in developing countries.

Population Growth rate -Births per 1000 Deaths per 1000 11970 751 119761 (1970-73) 11980-131

Population Growth rate Births per 1000 Deaths per 1000 (1970-75) 11970-751 (1970-75) 71976)

•AMERICAN SAMOA

000,00 40.1 (1995)

Government provides clinical services significated its and the FPA, founded also in 1973, 1&E. WPF grant to EPA.

CAUSTRALIA

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T itU/W.WU.:	1 1.73		5.1
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Government supports in activities and services available through MCH and Community Health Centres and free-of-charge through Medibank, FPA, founded in 1926, IPPF member in 1953, provided services to 20.101 new acceptors in 1974, through 73 clinics. FPA has un effective I&E and training programme and runs special courses for youth and sex education. Par capita use of orals highest in the world. Laws restricting advertising of contraceptives recently liberalized, and sales tax on oral contraceptives removed. Abortion subject to state laws and availability varies. Most liberal in South Australia where it is allowed on sociomedical grounds. Government gives international assistance and grant to JPPF.

COOK ISLANDS

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Fp available in some health clinics for a small fee elthough not specially promoted,

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Covernment programme since 1962; target to reduce both rate to 22/1000 by 1980. Fit integrated in MCH and general social welfare services. Tubal ligation, orals and IUDs most popular. FPA founded in 1963, IPPF member 1967, responsible for I&E, FPA is encouraging sex education in schools and has started a CBO project for condons. Abortion legalized on medical grounds in 1976. IPPF grant to FPA. Assistance from UNFPA, UNICEF and UKODM.

GILBERT ISLANDS (Statistics for former Gilbert & Ellice Islands)

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	<ul> <li>Fig. 1 and Appendix 10 to 10 for 10 fo</li></ul>					- 1

Government developing Ip as part of MCH, Services at nopplials and by touring nurses trained in IUD techniques. FPA, founded in 1969, works mainly on I&E. About 35.6% of fertile women were using contraceptives in 1972, IUDs and orals most popular. IPPF grant to FPA. Assistance from WHO and UKOOM to improve MCII facilities.

## *NEW HEBRIDES

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An FPA, founded in early 1974 is engaged in I&E, IPPF grant to FPA.

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Government support to fit octivities. Royal Commission to study contraception, sterilization and abortion established 1976. FPA, founded in 1935, IPPF member in 1955, had 43,857 visits at its 37 clinics in first half of 1976. Also plays a major role in IAE. Alth of eligible women use effective contraceptives, particularly orals, from private ductors. Sterilization gaining popularity since 1972. Family life editection included in most secondary school curricula with an active role from FPA. Extension of family life education to other levels of schooling planned. Abortion legal only to save life of woman, Covernment gives international assistance and grant to IPPF.

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Government programme since 1968 through 128 clipies, with 7,394 new acceptors in 1975. IUDs must popular followed by orals and injectables. By end of 1976, 60% of MCH clinics and Mo of aid posts to provide ip. 42 church hospitals and mobile services also provide services. FPA, founded in 1974, concentrates mainly on I&E, communication and training Sex education in schools. Abortion permitted to save life of mother only. IPPF grant to FPA. Assistance from WHO and Community Aid Abroad.

OSOLOMON ISLANDS

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Government policy to introduce in into health services announced in 1974, FPA, founded in 1973, operates a model clinic with 167 acceptors in 1975 and supplies contraceptives to MOH, Orals most popular followed by IUDs and condoms, IPA concerniates on I&E programmes, especially in the roral areas, and training. IPPF grant to FPA. Assistance from UNFPA, WHO and UKODM,

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Two voluntary FPAs, founded in 1968 and 1969, provide services.

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Population | Growth rate Births per 1000 Deaths per 1000 [1976] (1970-75) (1970-76) (1970-75)

### **ATOKELAU ISLANDS**

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FPA founded recently. IPPF grant to FPA.

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1.5	THE PROPERTY OF THE PROPERTY OF THE PARTY OF	resource de la companya de la compa				ľ

Government programme since 1958; target to reduce growth rate to 1%, 2,067 new acceptors at 8 clinics (4 in Outer Islands) in 1975; injectables most popular, followed by condoms, IUD and orals. FPA, founded in 1969, concentrates on I&E and provides training support to government, 6 motivators distribute orals and condoms, IPPF grant to FPA. Assistance from UNFPA, UNICEF and WHO,

## ATUVALU (Statistics included in Gilbert Islands)

FPA founded in 1975, after separation of Gilbert and Ellice Blands. Carries out an I&E programme.

### •WESTERN SAMOA

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	170,000	3.1% 34.9 (1975)	-	7.0(1	975)

Government programme since 1971; target to reduce fertility rate by 33% during 1976-1991. All methods including tubul ligation offered through health services. FPA founded in 1972, concentrates on I&E in support of national programme. Women's organizations also play an important role. Abortion permitted to save life of mother, IPPF grant to FPA. Assistance from UNFPA, UNICEF and WHO.

#### The International Planned Parenthood Federation

The International Planned Parenthood Federation is a non-profit international organization of 91 voluntary family planning associations dedicated to the belief that knowledge of family planning is a basic human right and that a balance between the world's population and its national resources and productivity is a necessary condition of human happiness, prosperity and peace.

The IPPF stimulates the formation of family planning associations in all countries of the world and provides them with financial support, technical assistance and advisory services in the medical, educational, training and administrative aspects of their work. IPPF supported associations offer contraceptive services, recruit and train staff and seek to inform and educate all sectors of the population about the practice of family planning and the urgency of reducing population growth rates for the future welfare of the individual and the social and economic development of the country. The IPPF assists associations to bring about a climate of public support in each country which will lead to a sound population policy and the provision of nationwide government family planning services. When this is achieved the association usually retains broad responsibilities for education and training and for ensuring community support for the programme, often carrying out pilot projects to seek solutions to special problems and using its independent status to pioneer new methods and approaches.

The International Planned Parenthood Federation is financed by voluntary contributions from private citizens and foundations all over the world, and by grants from governments. A gross budget of \$50.8 million (including the local income of grant-receiving organizations) has been established to carry out the international programme of assistance for 1977. To meet this need fund-raising campaigns have been established in several countries and associations are being assisted to seek local, private and government support for their work.



